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CHILD ABUSE SERVICE PROGRAMS

FIELD HEARINGS

BEFORE THE

SUBCOMMITTEE ON PUBLIC ASSISTANCE AND UNEMPLOYMENT COMPENSATION

OF THE

COMMITTEE ON WAYS AND MEANS HOUSE OF REPRESENTATIVES

NINETY-SIXTH CONGRESS

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CHILD ABUSE PREVENTION AND TREATMENT PROGRAMS

MONDAY, APRIL 7, 1980

U.S. HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON PUBLIC ASSISTANCE
AND UNEMPLOYMENT COMPENSATION,
COMMITTEE ON WAYS AND MEANS,
Los Angeles, Calif.

The Subcommittee on Public Assistance and Unemployment Compensation of the Committee on Ways and Means met at 9:15 a.m., pursuant to notice, in the Health Service Auditorium, 313 North Figueroa, Los Angeles, Calif., Hon. James C. Corman (chairman of the subcommittee) presiding.

[Press release announcing the hearings follows:]

[Press release of Mar. 20, 1980]

REPRESENTATIVE JAMES C. CORMAN ANNOUNCES HEARINGS TO BE HELD IN LOS ANGELES ON CHILD ABUSE SERVICE PROGRAMS

Representative James C. Corman, Chairman of the Subcommittee on Public Assistance of the Committee on Ways and Means, today announced hearings at which invited witnesses will testify on local child abuse service programs. These hearings will be held in Los Angeles, April 7–8 in the Health Services Administration Auditorium, 313 N. Figueroa, from 9 a.m. to 1 p.m. each day.

Corman's Subcommittee originated legislation now nearing final action in the Congress that would reform child welfare and foster care programs and respond to the needs of abused children. According to Corman, the next logical step is for Congress to focus on actual implementation of the legislation. He emphasized the need to develop child abuse prevention programs, and alternatives to long-term foster care. Corman stated that one of the purposes of the hearings was to identify those programs and projects which could serve as models for effective implementation of the legislation.

In announcing the hearings, Corman noted that last year in Los Angeles County alone over 50,000 cases of child abuse were reported. The Federal legislation which Congressman Corman authorized, H.R. 3434, the Social Services and Child Welfare Amendments, attempts to redirect Federal and state funds away from costly long-term foster care and toward child abuse prevention and other alternatives to foster care, including adoption programs.

Corman will hold a press briefing at the beginning of the hearings on Monday, April 7.

On Wednesday, April 9, Corman and other Members of the Subcommittee will be visiting MacLaren Hall in El Monte and Children's Village, a private facility for children with special needs in Beaumont, California.

Invitations have been extended to the witnesses that will be heard at the hearings in Los Angeles. Prior to Subcommittee action on the Social Services and Child Welfare Amendments, H.R. 3434, the Subcommittee received testimony from the general public.

For additional information regarding the hearings call Allen Jensen, Subcommittee on Public Assistance, 202/225–1076 or Representative Corman's District Office, 213/787–1776.

Mr. CORMAN. The Subcommittee on Public Assistance and Unemployment Compensation of the Committee on Ways and Means will come to order.

We are in this hearing today to review with local authorities circumstances related to foster care and child welfare service programs in Los Angeles County and how those programs may be improved in the passage of H.R. 3434.

During the last two Congresses we have dealt with this subject matter. The bill passed in the House in the last Congress was H.R. 7200. This year it's H.R. 3434.

We've had tremendous support from the professionals of this country in helping us devise a program to meet the needs of people who are most worthy of our attention; that is, the children among us who, for a variety of reasons, do not have parents who are capable of caring for them, and wind up in the most serious kind of circumstances.

I am pleased to have with me Congressman Rousselot, who was helpful in getting H.R. 3434 through the House and Senate and then through the conference on that bill. We hope to have the conference report accepted by both Houses early after the Easter recess. I'm sure the President will sign it as soon as it's finally adopted.

John Rousselot?

Mr. ROUSSELOT. Thank you. Mr. Chairman. I'm as pleased as you are to be here. We both are very proud of the work that is being done by Los Angeles County in the effort to make sure that welfare payments, foster care, and adoptions are monitored carefully. You and I have both stated many times how pleased we are to represent districts in Los Angeles County because of the fine job done in this important area.

Mr. Chairman, I am pleased to have this opportnity to meet in Los Angeles to discuss an issue which you and I, along with the other members of this subcommittee have worked on for many months. That issue is child abuse prevention, foster care, and programs to encourage and promote permanent adoption. As you have mentioned, H.R. 3434, the Social Services and Child Welfare Amendments of 1979, is nearing final action. It is my sincere hope that the President will have this bill on his desk for signing very soon. I want to compliment you, Mr. Chairman, for your hard work and leadership in this area and I would especially like to acknowledge the tremendous effort put forth by our colleague, Representative George Miller, in securing the passage of H.R. 3434.

A lot of attention has been focused lately on the American family and what, if anything, the Federal Government ought to be doing to foster family life in the United States.

Many people think the Federal Government has no business meddling in family matters in the first place, and that the Government ought to take a strictly hands-off policy with regard to family life.

Unfortunately, it's not that simple. Newspaper headlines and, sadly, sometimes our personal acquaintances as well, tell us that some families have problems so severe that the well-being of their individual members, including their children, is threatened; sometimes even their lives.

Some families cope with crises, stresses, and difficulties better than others. Occasionally, things reach a point where a child is in danger

of physical or emotional injury in the family setting, and it becomes necessary for the authorities to remove that child, either temporarily or permanently, in order to protect it.

This is the most drastic step the Government can take with regard to family life: drastic for the child, drastic for the parents. Removing a child from its parents is taking Government intervention to its limit.

The child welfare legislation our committee has nearly completed confronts this dilemma head on: how to structure Government authorities and services so that the strengths of the family are recognized while at the same time making sure that the well-being of individual family mmbers is not threatened.

We had to try to strike the proper balance between doing nothing, which might ignore the plight of many children already lost in the foster care system or in jeopardy in their own families, and doing too much, which might mean overzealous intervention without regard to the legitimate cultural and lifestyle differences in our diverse population, and which might lead to the removel of children from their families as a first rather than as a last resort.

Finding this balance wasn't easy, we discovered. Child welfare is not an easily legislated concept. We couldn't simply order a certain amount of it to be paid for with government checks the way we do with highways or dams or defense systems.

In our legislation, we tried first to eliminate some perverse incentives in present law that push child welfare services in the wrong direction, and second, to replace them with positive incentives to draw services toward new strategies and services.

For example, we put a limit on the open ended Federal funding for maintaining a child in foster care. We felt open ended funding had made foster care the easiest solution in too many cases and encouraged an overreliance on foster placements. Then we made it possible for States to shift Federal funds from paying for foster care maintenance to paying for preventative services that keep children out of foster care and reunification services that get them back with their families. Similarly, we opened up the system to voluntarily placed children rather than requiring that they all go through the court system—a process which has too often become merely a rubberstamp operation which clogs court dockets without safeguarding children's and families' rights. But we added requirements designed to protect families rights and responsibilities. We created new incentives for States to provide child welfare services that stress the importance of making every effort first, to keep a child in his or her own family, or second, to return the child to the family as soon as possible, and third, to find adoptive parents for children for whom a return to their own families is not possible. We particularly wanted to make sure that children did not get lost in the system, or nonsystem, of child welfare services.

Well, this bill is a first step in what will undoubtedly be a long, long process.

The proof of whether or not we are on the right tract will be found not back in Washington, D.C., but out here and in other States and localities. That is why we are having this hearing here today. To learn from the people who actually deliver child welfare services

what they have found to be the most effective ways of dealing with families in trouble.

We believe that the Adoption Assistance and Child Welfare Act of 1980 has great potential. But it is the people and programs here at the local level who will make that potential a reality.

Mr. CORMAN. We're very pleased to welcome as our first witness, an old and close friend and a woman that we both miss in the House. She now serves this county as one of five supervisors, Mrs. Yvonne Burke. Yvonne, we're pleased to have you here.

STATEMENT OF YVONNE BRATHWAITE BURKE, SUPERVISOR, LOS ANGELES COUNTY BOARD OF SUPERVISORS

Mrs. BURKE. Well, thank you very much. And to Congressman Corman and Congressman Rousselot, I am very pleased to be here and to first commend you on what I know has been a long and arduous task.

One of the things that I found out in my service in Congress is that it takes a lot of time and effort and hard work to accomplish anything that really makes a difference and certainly this piece of legislation, H.R. 3434 that has had many numbers before and sought to be placed in many different ways before the Congress is important to address and a very important problem. I have a written statement that I will read and then I have a few comments I would like to make.

I am supervisor Yvonne Burke of the Lost Angeles County Board of Supervisors. Part of my responsibilities include being the supervisor assigned as chairperson for the County Department of Public Social Services. And, it is good once again to welcome you here and I understand that your subcommittee is here this week to review a broad range of programs and services which are oriented toward children who are victims of child abuse and neglect. These hearings are most appropriate in view of the recent conference committee action on H.R. 3434, your bill to improve social services and child welfare programs.

I realize that this has been a monumental task and particularly though we have two people here who have arrived at leadership. Congressman Corman and Congressman John Rousselot and their efforts have made this possible. It would take really someone from oftentimes different walks, different approaches to be able to get anything passed before the Congress.

H.R. 3434 bill is important because it does take a clear and reasonable sense of direction for providing foster care and child welfare services.

It appears that the real intent of the legislation is to insure the needs of abused and neglected children receive a high priority and that children in out-of-home placement are not warehoused or forgotten, nor are they bounced from foster home to foster home.

I fully concur with the overall spirit of H.R. 3434, to emphasize programs to reunite families; to return children to their homes as soon as it's reasonable to do so, to highlight the need for early detection, intervention, and prevention of child abuse, and when these goals are not feasible—to facilitate the process for freeing a child for adoption.

As an alternative to long-term placement, H.R. 3434 has established an adoption subsidy program to enable certain financially needy fami-

lies to open their homes and share their love with those special children who are available for adoption but who are not considered that easy to place.

Overall, H.R. 3434 has a great deal of sensitivity and vision. It encourages a sound direction for services activities and permits State and local government to create innovative programs to assist families in crises and to safeguard the rights of all children.

In conclusion, let me state that we are very pleased that your subcommittee is conducting public hearings on these timely issues. And, I know that you will receive some excellent information from scheduled witnesses and we're confident you'll leave here with a different perspective on those priorities.

In that regard Los Angeles County stands ready to assist. I would like to comment particularly on two areas of the legislation: one is shelters. We have long since recognized that shelters are necessary not only for children but for adults and that's one of the things that I think is very important in this bill: that the adult who has a child who is subject to child abuse has—will be given a mechanism of where we will orderly develop shelters, and I can remember even from my experience in Washington where there I served on the Board of a shelter where child abuse is so often coupled with family abuse that it is not just the child that is part of that abuse. It's usually the mother—it's the whole family that is a violent atmosphere and unless there can be developed a series throughout the country, shelters for adults and children we have. It's possible for a single woman sometimes to find a place to go but most of those women were victims of abuse. They must keep their children with them and unless they take their child, that child will also be a victim of abuse.

Another area that I do think is very important in your approach is to do something about this phenomena that we have seen where some children who get into the foster system go from one home to another. It is not unusual that we hear about children who have been in 20 or 25 homes during their lifetime. In fact, I suspect that that is in many instances conservative.

And this whole approach of saying there will be some system of monitoring, of keeping track of children and where they're going so you don't have a child that goes from one home to another.

In addition to that, we get many complaints that there are children that people would like to adopt, that it's been difficult to adopt some of the children, and particularly older children where they do establish an association with a family.

I think every effort should be made to facilitate an orderly adoption by that family so that that child can get a long-term relationship because part of the real tragedy of our foster system is, today you can't get as many foster parents as we used to.

I think that this is being addressed. Your recognition of different fee schedulees for a different kind of problem—children.

Children may not be actually psychologically in need of full-time psychiatric services but, at the same time, are troubled children. Those children are the ones that need it the most and if we can have a method where we can provide some kind of different schedules so that we can promote different kinds of facilities, maybe then we can encourage

people who are interested in children into joining and acting as foster care children—or as foster care homes.

This bill is so important because it looks at many different directions. I realize it represents an accumulation of many different approaches and many different pieces of legislation which should have been passed a long time ago, but there still is time and I'm very optomistic that if we can place this kind of concentrated effort on our foster care system, we may be able to help some of the foster children; that unless we do something about them, they are the real problems we find in our society. They're the ones whom we find disproportionate in our institutions.

What you're doing here in giving a new approach, I think, can make a difference in the lives of those children.

I want to thank you and certainly congratulate you, of course, on being able to bring this together and where it looks like it's going to be reality.

Mr. COLEMAN. Thank you, Mrs. Burke. John?

Mr. ROUSSELOT. Thank you, Mr. Chairman. Yvonne, I know you're still getting your feet on the ground with this new job, but you mentioned that you found many times child abuse is connected with a general attitude or atmosphere of abuse in that family.

In your work here in the county, have you had a chance to meet with our social workers who have to deal with the problems of, well, do we separate the child from the family or is there a chance to rehabilitate the parents and keep the family together? How is that effort coming along?

Mrs. BURKE. Well, I think it's coming along much better and part of it is the result of the greater sensitivity and education process that's gone into this.

Today we see many movies, television shows on child abuse. As a result, you have a greater sensitivity on the part of school officials, pediatricians, and—for instance, my own pediatrician that I take my daughter to said to me, you know, he is often reluctant to report situations of child abuse when they come before him and in recent years he has——

Mr. ROUSSELOT. He has a doctor-client relationship?

Mrs. BURKE. That's right; and in recent years he felt, possibly because of a different method that people live today, that there's different kinds of living arrangements more so today than perhaps 10 years ago and he has found that there are more and more cases that he sees of child abuse and now that there is a greater sensitivity, those physicians are feeling that they are not betraying their clients if they call attention to a facility and to those who are in authority to problems of child abuse.

And I realize it's very difficult for a teacher, a principal——

Mr. ROUSSELOT. Or a doctor.

Mrs. BURKE [continuing]. Or a doctor to report—or a neighbor. A neighbor is most often the one that hears and knows that there is an incident of child abuse.

Mr. ROUSSELOT. There is some kind of child abuse?

Mrs. BURKE. That's right. That it's going on. Family—

Mr. ROUSSELOT. It's pretty hard to report on your neighbors.

Mrs. BURKE. That's true.

Mr. ROUSSELOT. We're just reluctant to do that.

Mrs. BURKE. I know that my first interest came in this about as an attorney and I represented an opera singer who had a grandchild who was being abused and it was very difficult for her because her daughter felt she was intervening in her marriage when this grandmother started reporting the fact that her son-in-law was spanking a 2-year-old and not just spanking a 2-year-old——

Mr. ROUSSELOT. Abusing.

Mrs. BURKE [continuing]. He was abusing the 2-year-old and at that time protective services were so careful that ultimately the grandmother failed and this child was killed and it was a very——

Mr. ROUSSELOT. Killed by the parent?

Mrs. BURKE. Yes. The child was killed by the father and it was a terrible, terrible thing where, and you know this was the grandmother who tried that who just really probably was unable to get through the system and today I believe that we have a sensitivity in our whole social services system that this does not happen as much; that it's much more difficult for a situation like this to happen where there have been constant reports and there is a family member.

But a lot of family members will not intervene. They're just afraid to. But I have to in all fairness also raise an issue that I find is——

Mr. ROUSSELOT. Do you find that we're improving on that?

Mrs. BURKE. Oh, I do. I think that we're improving; that people feel that there is a responsibility to report something that is that severe. I think there was a time when you just felt you don't—no one has a right to intervene between a parent and their child but today I don't think that there is any problem. I think that neighbors would be very quick to intervene; that parents, grandparents, relatives feel that they have a responsibility to intervene.

And, that's coming about, I think through media interpretation of some of those symptoms that lead up to ultimately what can be a serious case of child abuse.

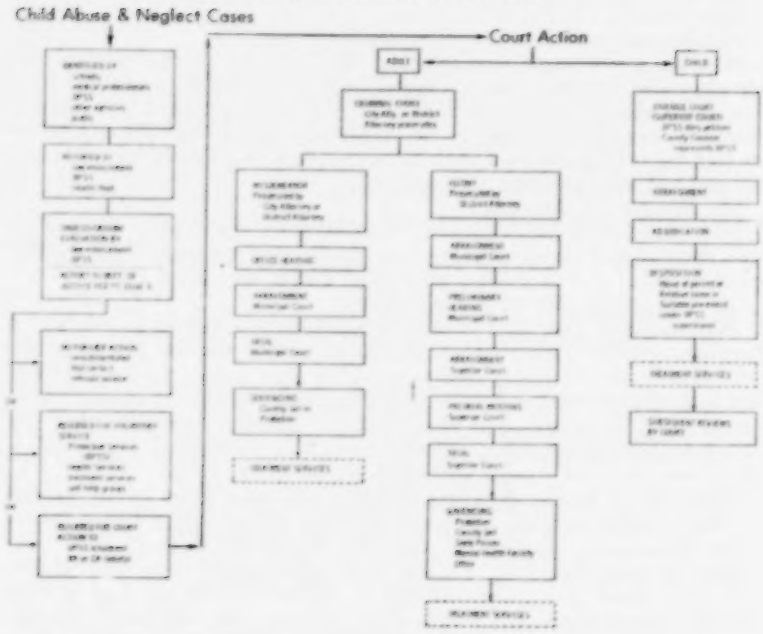
Mr. ROUSSELOT. Mr. Chairman, at this point I'd like to include the chart that we have called "Child Abuse Systems Flow Chart," which describes what people go through when they report abuse cases and relates to what you said about how does an individual whether they're a neighbor, doctor, whatever, know when to do it or when not to do it because we all hesitate to invade privacy——

Mrs. BURKE. Well, I also think that it has something to do with the economic level of the people involved. I think it's very easy when you have a welfare recipient, a neighbor would be—would not be afraid to, or a physician who is perhaps coming in contact with the child in that way, but child abuse has no economic social educational limitations and I think that it's very difficult among middle class and upper class people to be able to even come to grips with the fact that they may be witnessing child abuse.

Mr. CORMAN. Without objection, the chart will appear at this time in the record.

[The chart follows:]

CHILD ABUSE SYSTEMS FLOW CHART



Mr. ROUSSELOT. Well, thank you for being here.

Mrs. BURKE. Yes.

Mr. CORMAN. I just want to say that as you operate under H.R. 3434 we'd be very pleased to hear from you and your staff from time to time.

As an example, for the first time we are providing title XX funds that can be used for sheltering mothers regardless of their economic needs.

We have for a long time said that people in desperate poverty will be our concern, but we are beginning to move into a new area where we say that if there is a critical physical threat, we will at least temporarily, take these people under the wings of the county and the county authorities, even though they have not established any economic needs.

Your input in this area would be greatly valued.

Mrs. BURKE. I'm very happy too. I want to tell you that with my congressional career, it's sometimes—there are some days that really stand out as a little bit more—that shook you up more than others and I don't think that there was a day that really upset me as much as, and startled me as much as the day that that shelter bill failed on the Senate Calendar.

I really did not even—I thought that there was no one, certainly in the Congress, who would question whether or not to provide shelters for battered children and battered women and certainly everyone else assumed that as well.

But, I honestly have to tell you that that stands out and will always stand out in my mind as probably one of the most shocking experiences that I had which really brought home to me, because there are a lot of people that just don't even know the reality and sometimes those of us in public office get further and further away from the human reality of the way people live.

And, I'm just glad to see that finally there was recognition of this need.

Mr. CORMAN. Thank you, Mrs. Burke.

Mrs. BURKE. Thank you very, very much.

Mr. ROUSSELOT. Thank you.

Mr. CORMAN. Our next panel is Eddy S. Tanaka, acting director, Los Angeles County Department of Public Social Services, and Dr. Alfred J. Freitag, chairman, Los Angeles County Commission for Public Social Services.

Gentlemen, we're pleased to welcome you to the subcommittee. Mr. Tanaka, your predecessor, Keith Comrie, so far as I was concerned, was an honorary member of this subcommittee. He was tremendously helpful to us and not just with this bill but with the welfare reform bill which represents some 3 years of effort.

All I hear from the folks I know in Los Angeles County is that you're going to do at least as well as he did and that's a very high standard.

We're pleased to welcome you here, Dr. Freitag, we also appreciate that you are here with us this morning.

STATEMENT OF EDDY S. TANAKA, ACTING DIRECTOR, LOS ANGELES COUNTY DEPARTMENT OF PUBLIC SOCIAL SERVICES

Mr. TANAKA. Congressman Corman and Congressman Rousselot, I'm Ed Tanaka, acting director of the Los Angeles County Department of Public Social Services.

As you indicated with me is Dr. Alfred J. Freitag. He's the chairman of the Los Angeles County Commission for Public Social Services.

We appreciate this opportunity to present to you a brief overview of the foster care and children's services programs in Los Angeles County.

I understand the purpose of this hearing is to follow up on H.R. 3434 which I believe is the most significant bill on social services and child welfare in recent years.

The testimony you receive during these hearings should provide you with an indepth examination of current activities and programs which are designed to serve abused and neglected children and their families.

As you know, most dependent children who aren't in foster care have been victims of some form of child abuse and neglect.

Your subcommittee will hear from a wide range of elected officials, administrators, and professionals who have a dedicated interest in the detection, treatment, and prevention of child abuse and neglect.

In Los Angeles County we currently have approximately 9,000 children in foster care. This number includes children in individual foster homes as well as those in treatment institutions.

Interestingly though our statistics show our foster care caseload has been steadily decreasing during the past 7 years. This we believe is due primarily to a concerted effort in Los Angeles County to reunify families whenever feasible and in cases where return of the children to the home is not possible, we attempt adoption procedures quickly.

It now appears that our foster care caseload is leveling out but we're not sure whether this decline is going to be continued or whether the number of children will increase because of the new emphasis on identifying and reporting suspected child abuse.

While it would appear that the incidents of abuse and neglect are increasing, we are not able to verify this. The facts are that reports of suspected abuse have increased substantially. We think this is due a lot to the increased public awareness of the problem as well as recent State laws which require reporting of suspected child abuse by certain people.

Those reporting are immune legally and protected by law. In Los Angeles County we recently established a child abuse hotline—a toll-free hotline which is publicized to encourage citizens to report any sort of child abuse or suspected abuse.

The hotline also serves as a referral point for abusing or potentially abusing parents, for families in stress and for children, who themselves are victims of abuse.

These reports can be anonymous. It can be done by neighbors. We get a significant number of calls currently. Since many new children enter our system each month a good deal of emphasis in Los Angeles County is directed toward recruitment of foster parents. We are always in need of more foster parents throughout the county to provide a safe and caring environment for foster children.

Of course, many children are in need of special care and treatment provided by the many fine children's institutions and I'm happy to see that you have some of these institutions scheduled for hearing later this morning.

I'm also personally pleased that the board of supervisors recently appointed me the chairperson of the Los Angeles County Interagency Council on Child Abuse and Neglect. I understand our distinguished district attorney, Mr. John Van de Kamp will be testifying this morning. This agency is an innovative approach which brings together a comprehensive focus of public agencies to deal with child abuse and neglect.

The testimony which you will receive today and tomorrow will highlight a compelling problem of victimized children. Nevertheless I think we can be optimistic about the future. H.R. 3434 makes very clear Federal policy on child abuse. The needs of children in foster placement will be met; however, the new Federal emphasis will be on child welfare services: to prevent, treat, and create sound alternatives to long-term foster placement.

Along similar lines, we are especially pleased that your subcommittee recognized the need for Federal subvention in voluntary placement. The requirement for a judicial review of cases within 6 months is a reasonable expectation. You will also be hearing testimony on adoption subsidies from experts but I want to express our appreciation for highlighting the adoption alternatives in H.R. 3434. I think they will especially be helpful in finding homes for the very-hard-to-place

children. I trust that the hearings will invoke a real sense of what is currently happening to abused and neglected children with a sense of which priorities need to be established in the future.

With that, I would like to have Dr. Freitag discuss with you an indepth study on child abuse and neglect which his commission recently concluded. This study is just one of many contributions his commission has made to public social services in Los Angeles County.

Thank you very much for this opportunity to testify.

[The prepared statement follows:]

STATEMENT OF EDDY S. TANAKA, ACTING DIRECTOR, LOS ANGELES COUNTY DEPARTMENT OF PUBLIC SOCIAL SERVICES

I am Ed Tanaka, Acting Director of the Los Angeles County Department of Public Social Services. With me is Dr. Alfred Freitag, Chairman of the Los Angeles County Commission for Public Social Services. We appreciate this opportunity to present to you a brief overview of the foster care and children's services programs in Los Angeles County.

I understand the purpose of your hearing is to follow-up on HR 3434, which I believe is the most significant bill on social services and child welfare developed in recent years. Thus, the testimony you receive during these hearings should provide you with an in-depth examination of current activities and programs which are designed to serve abused and neglected children and their families. As you know, most dependent children who are in foster care have been victims of some form of abuse or neglect. Your subcommittee will hear from a wide range of elected officials, administrators, and professionals who have a dedicated interest in the detection, treatment and prevention of child abuse and neglect.

In Los Angeles County, we currently have approximately 9,300 children in foster care at any given time. This number includes children in private foster homes as well as those in residential treatment facilities. Interestingly, our statistics, however, do reflect a steady decline over the past seven years in our foster care caseload. This is due primarily to a concerted effort during recent years in Los Angeles County to re-unify families whenever feasible and to free those children for adoption when it is clear that returning the child home is not possible. While it now appears that our foster caseload is leveling out, we feel it is not yet possible to fully assess whether or not any further decline can be expected or whether the number of children will increase as a result of the new emphasis on identifying and reporting suspected child abuse.

While it would appear that incidents of child abuse and neglect are increasing, we are not able to fully verify this. The facts are that reports of suspected abuse have increased substantially due to a new public awareness of the problem, as well as recent State laws which require the reporting by certain persons of suspected child abuse, with legal immunity and protections for those who report. In Los Angeles County we recently established a toll-free hotline which is publicized to encourage the public to call for social services intervention when child abuse is suspected. The hotline also serves as a referral point for abusing, or potentially abusing, parents; for families in stress; and for children who are themselves victims of abuse.

Since many new children enter our system each month, a good deal of emphasis in Los Angeles County has been directed toward the recruitment of foster parents. We are always in need of more families throughout the County to provide a safe and caring environment for our foster children. Of course, many children are in need of, and benefit from, the special care and treatment programs offered by the many fine children's residential institutions which are located in Los Angeles County. We are proud of our fine relationship with these dedicated providers, and I am pleased that this Subcommittee will be hearing from some of them later this morning.

I am personally pleased to have been recently appointed by the Board of Supervisors to chair the Los Angeles County Inter-Agency Council on Child Abuse and Neglect; and I understand that our distinguished District Attorney, Mr. John Van de Kamp, will be here this morning to discuss with you this innovative approach which brings together a comprehensive focus of public agencies to deal with child abuse and neglect.

The testimony which you will receive today and tomorrow will highlight a compelling problem of victimized children. Nevertheless, I feel we can be optimistic about the future. In H.R. 3434, I believe the Federal policy direction is clear. That is, the needs of children in foster placement will be met, but the new Federal emphasis will be on child welfare services—to prevent, treat, and create sound alternatives to long-term foster care. Along similar lines, we are especially pleased that your Subcommittee recognized the need for Federal participation in voluntary placements. The requirement for a judicial review of these cases within six months is a reasonable expectation. Although you will receive expert testimony on the subject of adoption subsidies, I want to express our appreciation to you for highlighting the adoption alternatives in H.R. 3434. They will be especially helpful in providing permanent homes for hard-to-place children.

I trust that these hearings will provoke a real sense of what is currently happening to abused and neglected children—with a sense of which priorities needed to be established in the future.

Now I would like to have Dr. Freitag discuss with you an in-depth study on child abuse and neglect which his Commission recently concluded. This study is just one of the many contributions his Commission has made to public social services in Los Angeles County.

Thank you very much for this opportunity to testify.

Mr. CORMAN. Thank you. Dr. Freitag?

STATEMENT OF ALFRED J. FREITAG, CHAIRMAN, LOS ANGELES COUNTY COMMISSION FOR PUBLIC SOCIAL SERVICES

Mr. FREITAG. Thank you.

Congressman Corman and Congressman Rousselot, ladies and gentlemen, it's certainly a privilege to be able to appear before you in an area that has been of considerable concern to our commission. I'm chairman of a 15-member citizen advisory commission charged with the responsibility of consulting with and making recommendations to, the director of the Department of Public Social Services and the board of supervisors on welfare and social services issues.

The professionals who appear before you in the next several days will offer you facts and figures based on their direct experience in the field. It is my task to represent the layman's point of view enhanced by the opportunity we have had on the commission to study the problem in depth.

In 1974 our commission conducted public hearings and evaluated the programs for dependent children of the court. In our report to the board of supervisors, we offered 35 recommendations for change and improvements in the courts, out-of-home care, community resources and personnel policies.

A great many of these recommendations were acted upon, resulting in the creation of an interagency council, separate court facilities for nondeliquent children, mandatory orientation and training for foster parents, the development of a foster parent handbook and the creation of a therapeutic treatment program at MacLaren Hall to be operated by the Department of Public Social Services, and the establishment of comprehensive public information programs to inform the community about available protective services before problems reach the point that they require court intervention.

As you might expect not all of the problems identified could be resolved. Many of the issues raised at that time came up again when we began our child abuse study in 1978—preventive intervention, combined agency training programs, foster family recruitment, support

services such as homemakers, family counseling and respite care, placement resources for seriously disturbed children, and the creation of the supportive work environment for the frontline staff on whom we all rely.

At the conclusion of my remarks I would like to present each of you with a copy of the commission's "Child Abuse Study." We spent 14 months developing our recommendations, and I am sure that you will find that we identified a number of issues which are in keeping with the philosophy behind H.R. 3434.

I'd like to briefly speak to some of these at this time.

DAY CARE

The commission sees community child care as an essential component in the prevention of child abuse. The scope of services offered to include extended day care for school-age children during working hours, supervision of infants and preschoolers of working parents, respite care for all ages during family crises, and parent education, I strongly feel that the latter should stress family-life education, and include more than just parenting.

Quality day care is hard to find and likely to become more so as the numbers of working mothers increase. The results of the 1980 Virginia Slim's American Women's Opinion poll indicate that twice as many women hold full time jobs today as 10 years ago and the women surveyed believe that almost all able-bodied women will be a part of the work force by the year 2000.

TRAINING

The commission made a number of recommendations with respect to training. We are strongly committed to the concept that the services provided by DPSS and other public and private agencies are only as good as the skills, knowledge and commitment of the line staff.

EMERGENCY SHELTERS

While the protection of the abused child must be our most urgent concern, it is important that the family unit be preserved and strengthened wherever possible. At times it is essential that a child be removed from the home. If the resources were made available however, the alternative of a family crisis center, providing safety to the child and support and counseling for the parents, could be considered. I commend your committee for recognizing this need and enabling States to use title XX funds for emergency shelters for adults as well as BOR children.

CHILD WELFARE SERVICES

In both its "Dependency Study" and the "Child Abuse Study" the commission identified the need for outreach prevention and support services. For far too long our efforts to help troubled families have stressed rehabilitation and reunification. How much more positive an approach which emphasizes early intervention and preservation of the family unit.

One important program which we support at the local level and urge future consideration of is parent education. Most experts in the field mention inadequate parenting as a contributing factor in the continu-

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ing cycle of abuse. Of all the forms of training we offer our young people, what could be more important than preparation for the responsibilities of parenthood?

I am sure you will hear the panels on identification and parent's point of view explain that most abusive parents are much like you and I are; they love their children. They want them to be healthy and happy and they try to do a good job. Their inability to handle the stresses of daily life and the demands of parenthood can instead lead to abuse, sometimes to the loss of their children in the courts; on occasion to tragedy such as we heard a few moments ago.

All of us must work together in finding solutions for these complex problems. Thank you for the obvious care and consideration which has gone into the development of the child welfare amendments of 1979. As you continue to expand and refine these concepts, our commission will be pleased to be of assistance in any way that we can. If there are any questions Mr. Tanaka and I will be happy to answer them.

Mr. CORMAN. Gentleman, thank you very much. Mr. Rousselot?

Mr. ROUSSELOT. Thank you both very much for being here. Thank you for the report indicated.

Mr. CORMAN. May I say that without objection I will make the report a part of the subcommittee's file.

Mr. ROUSSELOT. I promise to read it carefully.

I've got a couple of questions. Why do you suppose that no Los Angeles foster care kids were involved in the Jonestown, Guyana, situation. Have you tracked that to see why none of them were involved or is that an impossible question?

Mr. TANAKA. I don't know if it's impossible, Congressman Rousselot, but we have a system whereby no foster care payments will leave the county without prior approval way up in the hierarchy of the system.

Mr. ROUSSELOT. I see.

Mr. TANAKA. In other words the change cannot just simply be made——

Mr. ROUSSELOT. To a foreign country, wherever that is.

Mr. TANAKA [continuing]. Even out of the county.

Mr. ROUSSELOT. Yes. As you know the so-called Reverend Jones had an operation here. Were there any children who went to Guyana who in fact came from this area and for whom they had requested payment?

Mr. TANAKA. They didn't request payment but there were some children who were formerly recipients of public assistance who eventually ended up in Guyana.

Mr. ROUSSELOT. From this county?

Mr. TANAKA. From this county; however, they were no longer on public assistance when they were there.

Mr. CORMAN. Can I ask if those were AFDC or foster care or both?

Mr. TANAKA. They were family assistance.

Mr. CORMAN. Family assistance, AFDC. Nothing else.

Mr. ROUSSELOT. Well, you've given us 24 recommendations in your report. Doctor, that's a lot. Did you put them in order of priority?

Mr. FREITAG. No. The recommendations are grouped according to subject matter, not in priority order.

Mr. ROUSSELOT. Could you tell us which ones you think are most important in relation to what we can do?

Mr. FREITAG. Some recommendations relate specifically to issues in Los Angeles County; however, I believe that one idea which is valid on a national basis is family life education.

I would be inclined to say that this is a very important one; whether it's the only one, I'm not prepared to say.

Mr. ROUSSELOT. Recommendation 1 is that school systems in the elementary and secondary levels must be encouraged to provide programs of inservice training for existing staff in order to assure proper identification of child abuse victims and referral to the appropriate helping resource. Is that the most important one?

Well, now I know of a case where a parent was reported by a teacher to be abusive to a child and yet it turned out that the child was misreporting or exaggerating.

How do we prevent this? How do we keep teachers from being overzealous?

Mr. FREITAG. There is no way to really prevent that except with further education and urging of caution. Most teachers, I would submit, are going to make careful judgments before reporting child abuse to the authorities. On the other hand, I know of teachers, too, who have made legitimate reports and were subjected to tremendous abuse and retaliation.

Mr. ROUSSELOT. It works both ways.

Mr. FREITAG. Yes, indeed.

Mr. ROUSSELOT. Well, we appreciate both of you being here today.

Mr. CORMAN. Thank you very much.

Our next panel is District Attorney John Van de Kamp, member of the Inter-Agency Council on Child Abuse and Neglect, Christina Crawford Koontz and Miss Abbe Lane Leff.

We are pleased to welcome you to the committee.

STATEMENT OF JOHN VAN de KAMP, DISTRICT ATTORNEY, MEMBER, INTERAGENCY COUNCIL ON CHILD ABUSE AND NEGLECT (ICAN)

Mr. VAN DE KAMP. Good morning Mr. Chairman, Mr. Rousselot. I'm John Van de Kamp, the district attorney of Los Angeles County and I'm pleased to have with me today Miss Christina Crawford Koontz. Many of you may recognize her—at least by her middle name—from her book "Mommie Dearest." She's going to be following me today talking about how the private sector here in Los Angeles County has helped us in this so difficult area.

I'd like to stress this morning one thought. In this particular area both the private and public sectors must work together. Now, I realize that is one of the great cliches of all time. But it's probably more true in this area than in most others.

And Los Angeles County, I'm pleased to say, has been relatively successful in this field. Mr. Tanaka has already testified that the hierarchy of DPSS has implemented some pretty good administrative controls which tend to prevent the behavior that sometimes leads to the death of children.

We work together well; there probably is no other county in the country with such an interdisciplinary program.

I'd like to give you an example. It's taken from a case file. It's been changed a bit to protect some of the people involved.

It will give you the feel for the number of different agencies which can get involved in a particular case. It's the story of a 9-year-old child who reported to her mother that her father had been sexually molesting her for a period of 2 years. And in this case, the father, upon being confronted by the mother, admitted the truth. This doesn't always happen but it happened in this case.

And unlike other cases, the parents talked about it and they agreed to seek some help. They went to the local police department and gave a complete report. The father was not arrested at that point but was advised that a warrant would be issued when the matter came to the district attorney and the charges filed.

He was also advised that he and his attorney would be notified when that occurred.

The child in this case was not taken into protective custody because the parents decided it would be more appropriate for the father to move to a separate residence. So, the child remained home with her mother rather than being placed in a foster home or an institution.

Well, the police agency then had a responsibility. It requested the Department of Public Social Services to file a petition on behalf of that child in juvenile court.

DPSS did file such a petition for the purpose of assuming juvenile court jurisdiction over the child.

In the juvenile court proceedings the office of the county counsel represented DPSS, who was both the petitioner and represented the interest of the child.

The case was uncontested. So the child became a ward of the juvenile court under the supervision of DPSS. The parents had their own attorneys present during that proceeding.

A guardian ad litem, from the juvenile dependency court improvement project, and you're going to be hearing more about that in the next day or so from Judge Giannini who was assigned to the child throughout the entire juvenile court process.

When the child became a ward of the juvenile court, DPSS had the responsibility to supervise the child's welfare and to provide the rehabilitative and preventative services to the child and family. DPSS in this case involved the child in the Child Abuse Treatment Project and Daughters United. This program is implemented through DPSS.

The parents also participated in the Child Sexual Abuse Treatment Program and Parents United at the recommendation of the juvenile court.

In short, the purpose of those two programs is to provide counseling and help to both the children and to the families that come before them, hoping in the long run to prevent repetition of the behavior that brought them to them in the first instance.

Parallel to all these proceedings of course is the criminal proceeding. Criminal charges were filed by the district attorney's office against the father. The father was represented by an attorney throughout the criminal process. If he had been indigent, the public defender's office would have provided that representation.

Now there are a number of variables in the criminal process. In this case the father entered a plea of guilty. The court referred the matter

to the Probation Department, another agency that comes into play here to investigate the case and prepare a presentence report for the court.

Well, as you know, the sentencing judge has several alternatives at the sentencing stage. In this case the father had no prior record. He had a good employment record. He provided the amenities of life for his family. He had substantial ties within the community, and as indicated—it doesn't always happen—he was sincere and cooperative in wanting to participate in a rehabilitation program for the entire family.

And so the result was that the court, on the recommendation of the Probation Department, suspended the imposition of a sentence and placed the father on probation.

A condition of probation was that the father himself participate in the Child Abuse and Treatment Program and Parents United, a result which was consistent with the juvenile court disposition.

And so when he was placed on probation he was under the supervision of the Probation Department.

Those counselors who work with families in which intrafamilial sexual abuse occurs consider the criminal court process an integral part of the treatment services.

And, I wish to reemphasize that today because I'm sure that in the course of your hearing you've heard that the criminal courts should not be involved in this area. Well, that's wrong because there are cases that are so severe that it's necessary, and there are cases like this one where we get together with other treatment programs so we can make sure that fathers or those who are involved in the abuse get the help and treatment that is required.

That can be the constructive beginning of the therapeutic process in which the assumption and the responsibility for guilt by the father relieves the guilt and stress experienced by the child.

Now this case actually ended as I've reported. It could have had a different result without the efforts of the various agencies and departments which impact on the family.

If you go back over this case step by step, you'll see agency after agency involved.

Now had those agencies not had some kind of feel or sense of what each other was doing, we'd have a fragmented service and the possibility of inconsistent disposition.

In many cases the criminal process is not a solution by itself. Nor does any other agency alone necessarily provide a clear solution.

The case illustrates the number of differing disciplines that are involved and how they impact the family. Through the implementation of our multidisciplinary approach, we believe effective protection and appropriate services are being provided.

What we're saying today is that one of the ways that you get effective response going is to get interagency and private community groups to work together in the same direction.

The coordinated approach provides preventive and protective services for children while at the same time providing supportive services for their families.

And that gets me to the Interagency Council on Child Abuse and Neglect, which is called ICAN. It was established in 1977 here in

Los Angeles County by the county board of supervisors. ICAN serves as the county's official agent to provide overall guidance and coordination in the development and improvement of the services for families and victims of child abuse and neglect.

We have over 20 public and private agencies who are represented in ICAN: legal, law enforcement, social agencies, educational, health and mental health agencies all participate. They meet on a monthly basis and try to develop policies and methods of implementation to improve the level of coordination and effectiveness in the provision of child protection services, and to try to stimulate other agencies. We have subcommittees who deal with specific areas of interest and concern: legislative, inservice training programs, community awareness programs, the development of innovative procedures to providing a more sensitive approach to dealing with the victims of child abuse and neglect.

Because of the endorsement of the county department heads involved, the work of the professional experts, and the support of the board of supervisors, we've had some positive changes effected.

We've developed the first interagency child abuse treatment program in the county. We've developed and implemented a training program for all disciplines involved in child abuse and neglect.

We coordinated the development of administrative guidelines for educational personnel and the identification and reporting of child abuse and neglect. We now have a comprehensive directory of services.

We've developed the neighborhood stress center project—a project which is an innovative approach providing community-based child abuse prevention and treatment services to families.

We've encouraged the development of the 24-hour hotline servicing Los Angeles County and implemented by DPSS.

We've developed guidelines to be used by member agencies to evaluate pending legislation and, as I've indicated, we've developed synergy. We've stimulated other agencies to develop projects on their own.

In my own office for example we have our domestic violence program which is aimed at better fathoming out what we have when we get child abuse cases reported to us. And, as a result of the expertise that we've developed, we're getting more cases filed where before the indices of child abuse simply would not have been recognized and no filing would have occurred. Similar programs have developed in the city attorney's office and elsewhere.

And last, but not least, we've supported the development of family life programs within the county school system.

ICAN is developing information systems between the juvenile and criminal court process so more sensitive and consistent results are achieved.

Hopefully what we're able to do in our county will not only stimulate each of use who are representing ICAN but we hope that we may sensitize you so that other cities, counties, and other metropolitan areas might develop the kind of interagency cooperation that now exists in Los Angeles County.

Now, there's one other factor that's involved in all this, Christina will talk about that, and that's the private sector. Through ICAN Associates we are now able to do a number of things that simply could not be done in the public sector. I just learned for example a few

minutes ago that a private foundation has provided beds for MacLaren Hall. That's a great gift—it means $30,000 for new beds for that hall.

Christina will tell you what ICAN Associates is doing to plug in to the county effort and will tell you of their effort to get a pilot stress center underway.

So, it's my pleasure to give to you Christina Crawford Koontz.

[The prepared statement follows:]

STATEMENT OF JOHN K. VAN DE KAMP, DISTRICT ATTORNEY, COUNTY OF LOS ANGELES

Consider the following case history and the results when a multi-disciplinary approach is taken.

A nine-year-old child reported to her mother that her father had been sexually molesting her for a period of two years. The father, upon being confronted by the mother, admitted its truth.

After discussing the problem, the parents agreed to seek help.

They went to their local police department and gave a complete report. The father was not arrested at that time but was advised that a warrant would be issued when criminal charges were filed by the district attorney. He was also advised that he and his attorney would be notified when that occurred.

The child was not taken into protective custody because the parents decided it would be more appropriate for the father to move to a separate residence. This decision by the parents allowed the child to remain home rather than being placed in a foster home or institution.

The police agency then requested the department of public social services to file a petition on behalf of the child in juvenile court.

The department of public social services did file a petition for the purpose of assuming juvenile court jurisdiction over the child.

In the juvenile court proceedings, the office of the county counsel represented D.P.S.S. who was the petitioner and D.P.S.S. represented the interests of the child.

The case was uncontested and the child became a ward of the juvenile court under the supervision of D.P.S.S. The parents had their own attorneys present during the juvenile court proceedings.

A guardian ad litem, from the juvenile dependency court improvement project, was assigned to the child throughout the entire juvenile and criminal court process. (This program will be discussed in detail by Judge Peter Giannini tomorrow.)

When the child became a ward of the juvenile court, D.P.S.S. had the responsibility of supervising the child's welfare and providing rehabilitative and preventive services to the child and family. D.P.S.S. involved the child in the child sexual abuse treatment program and daughter's united. This program is implemented through D.P.S.S.

The parents also participated in the child sexual abuse treatment program and parents united at the recommendation of the juvenile court.

The purpose of the child sexual abuse treatment program is to provide:

1. Assistance and counseling to families and children having experienced sexual abuse;
2. Protection for the child from risk of future exploitation and stigmatization;
3. Treatment to minimize emotional damage from the abuse;
4. A forum for parents and children to share insights into their problems and try to resolve them in a positive manner.

Parallel to the juvenile court proceedings is the criminal proceedings.

Criminal charges were filed by the district attorney against the father. The father was represented by an attorney throughout the criminal process.

A number of variables can occur during the court process. However, in this case, the father entered a plea of guilty. The court then referred the case to the probation department to investigate and submit a report of its findings and recommendations to the court.

The criminal court has several alternatives at the sentencing stage. In this case, the father did not have any prior criminal record. He had a good employ-

ment record and substantial ties within the community. He was sincere and cooperative in wanting to participate in a counseling program.

Following the recommendation of the probation department, the court suspended the imposition of a sentence and placed the father on probation.

A condition of probation was that the father participate in the child sexual abuse treatment program and parents united. This result was consistent with the juvenile court disposition.

When the father was placed on probation he was under the supervision of the probation department.

Those counselors who work with families in which intrafamilial sexual abuse occurs, consider the criminal court process an integral part of the treatment services.

This can be the constructive beginning of the therapeutic process in which the assumption of responsibility by the father relieves that guilt and stress experienced by the child.

This case could have had a different result without the efforts of the various agencies and departments which impacted on the family.

The result could have produced fragmented services and inconsistent dispositions.

In many cases, the criminal court process is not a solution by itself, nor does any other agency alone provide the solutions.

This case illustrates the number of differing disciplines which are involved and impact on a family.

Yet through the implementation of this multi-disciplinary approach, effective protection and appropriate services were achieved.

Society is becoming increasingly aware that child abuse and neglect are problems of major proportion which prevade all societal levels and impact significantly on each affected discipline.

An effective response to the problems of child abuse and neglect cannot be accomplished without inter-agency and community cooperative efforts.

This coordinated approach provides preventive and protective measures for children while at the same time providing supportive services for their families.

The inter-agency council on child abuse and neglect (ICAN) was established in 1977 by the Los Angeles County Board of Supervisors.

I.C.A.N. serves as the county's official agent to provide overall guidance and coordination in the development and improvement of services for families and victims of child abuse and neglect.

Over 20 child protection public and private agencies are represented on I.C.A.N.

This representation includes legal, law enforcement, social services, educational, health and mental health services.

They meet on a monthly basis developing policies and methods of implementation to improve the level of coordination and effectiveness in the provision of services.

Subcommittees deal with specific areas of interest and concern such as legislation, in-service training programs, community awareness programs, and the development of innovative procedures to provide a more sensitive approach to dealing with the victims of child abuse and neglect.

Because of the endorsements by the Los Angeles County department heads, the professional expertise of the I.C.A.N. members and the support of the board of supervisors, the council has been able to effect broad-based positive changes throughout the county's child protection system.

During the past few years, I.C.A.N. has:

1. Provided a forum for inter-agency communication and coordination of services for the protection of children;

2. Developed the first inter-agency child sexual abuse treatment program in Los Angeles County;

3. Developed and implemented training programs for all disciplines involved in child abuse and neglect;

4. Coordinated the development of administrative guidelines for educational personnel in the identification and reporting of child abuse and neglect;

5. Developed a comprehensive directory of services;

6. Developed the neighborhood stress center project, this concept is an innovative approach to providing community-based child abuse prevention and treatment services to families;

7. Encouraged the development of a 24-hour hot line servicing Los Angeles County and implemented by the Department of Public Social Services;

8. Developed guidelines to be used by member agencies in evaluating pending legislation;

9. Stimulated agencies to develop and implement specialized child abuse programs such as in the probation department, the city attorneys office and the district attorneys office;

10. Supported the development of family life curriculum within the county school system.

I.C.A.N. is developing coordination systems between the juvenile and criminal court processes so that more sensitive and consistent results are achieved.

The accomplishments of I.C.A.N. will hopefully stimulate the development of multi-disciplinary cooperative efforts throughout the nation.

STATEMENT OF CHRISTINA CRAWFORD KOONTZ, PRESIDENT OF ICAN ASSOCIATES CORPORATE BOARD

Mrs. KOONTZ. Congressman Corman, Congressman Rousselot, I'm Christina Crawford Koontz, president of ICAN Associates Corporate Board representing the private fund-raising part of the Los Angeles County Interagency Council on Child Abuse and Neglect.

I would like to address my comments today to the progress of the ICAN Associates group in two areas: Project MacLaren and development of family stress centers.

It is deeply gratifying to me personally to be involved in this uniquely coordinated effort between local government divisions, community and private citizens addressing themselves to solutions to the human tragedy of child abuse with which I am very familiar. Because we have come a very long way; when I was a child, an abused child, neither I nor my family were able to receive the help these hearings focus upon today.

First, because child abuse was simply not recognized as a legitimate area of concern outside the family unit. Second, because there were no laws to protect the safety of children in their own homes and last, because even if the problem was recognized and the family came to the attention of outside authorities, there were no avenues by which they could receive the kind of treatment needed to change the family environment or the parents' behavior in a constructive way.

I would like to give you a brief illustration of how an abused child feels because although I know there will be many professionals testify in these hearings, you may not have many children giving a voice for themselves. I grew up during the years when a parent could declare a child incorrigible and have that child removed from the home without the parent's behavior or the family ever coming into question.

In fact, my one encounter with external authority occurred when I was 13 years old. My mother and I had a terrible argument one night after she had been drinking. She had lied about me being expelled from school and I made the mistake of confronting her about that lie. She became enraged and hit me. When I refused to cry she said, as though I had caused her behavior, "You just love making me hit you, don't you?" I remember saying that I thought she should be more mature and understanding because she was the parent. With that, she attacked me, beat me very badly and tried to choke me. After we were forcibly separated I was locked in a room. My mother called the juvenile authorities and a few hours later an officer arrived to ques-

tion me. Enough time had elapsed then for the bruises to show, t face to swell, and my condition to be absolutely apparant.

The officer told me that my mother had declared me incorrigib and wanted him to remove me from the house that night. He was ki and understanding but explained that at that time his only action w to take me to juvenile hall; that I might eventually be placed in foster home, but because of my age, 13 years old, I might not be ea to place. The terrible irony of this is that in addition to having be abused for many years I was also an adopted child.

That night the juvenile officer, who despite his personal concern w unable to offer anything other than the terrifying prospect of juven hall, made me realize as a child how totally helpless I was; how hop less my situation was and how much like a criminal I was made to fe I will never forget the feeling that I was all alone in a world that w totally on the side of parental authority. As I grew older I also ca to realize the tragedy for my mother who refused help or profession guidance of any kind. I believe she died a deeply disappointed pers in at least two of her children; the two children she most severe abused.

These complex family dynamics and the long duration of abuse sp in not just days, not just months or years but entire lifetimes perpet ated from multiple generations cannot be solved quickly. It tak specialized programs, specially trained individuals, intensive ther peutic intervention for both children and parents and, finally, t cooperation of all facets of our society since we now realize that ch abuse unfortunately does not respect economic, ethnic, or geograph boundaries.

The private foundation of ICAN Associates was formed in 19 to implement, through donations, the concept of local family stre centers designed to bring one-stop comprehensive services to the families already involved in child abuse.

Another effort of the group now includes constructive focus on b tering conditions at MacLaren Hall. Project MacLaren is the effort improve the physical conditions of MacLaren Hall where childr from the county needing protecting custody reside until suitable pla ment can be found. The associates group has provided holiday parti gifts to the children and is beginning a renovation process which w include locker facilities, redesign of the nursery area, new beds, ov all redecoration and donations of furniture, bedding, and clothing.

This project is important because it not only demonstrates imme ate concern felt for traumatized children who are removed from th homes because of extreme danger to their safety but it is also intend to make the surroundings less institutional and more conducive to ducing the anxieties and disorientations that children experience. C profound gratitude of ICAN Associates—gratitude to many priv citizens, the Associates for Troubled Children, the Corporations the 7-Eleven stores and the private Samuel Goldwyn Foundation w are contributing to these efforts.

The ICAN Associates Corporate Board drew a grant from t Mattel Foundation and matching funds from other donors have p vided the first fully functioning family stress center in Los Ange County under the guidelines and auspices of the program which w designed by the Los Angeles County Council for Child Abuse a Neglect.

Cedar House of Long Beach has been designated pilot project in this program and has been operating under the standards set by the ICAN Council for nearly 1 year. Freda Hinsche, administrator of Cedar House, is scheduled to speak at these hearings so I'd like to leave the specifics of the treatment programs with her and give you today a general overview of the family stress center.

The ICAN center at Cedar House is the absolute antithesis of the traditional institution. It is, as its name implies, a house, in a residential neighborhood. This particular criterion, a homelike setting, provides one of the fundamental bases upon which much of the program is built. There is a kitchen, a dining-room table, a large living room, a children's playroom, in addition to several rooms used specifically for individual and group therapy sessions. The entire atmosphere of the center is designed to be nonthreatening, warm, and friendly. It is in the setting itself that therapy begins.

Since the philosophy is centered in reeducation resocialiation and the transfer of that new knowledge directly back into the family's own home environment—the closer a center and its staff come to revocating a recognizable home the easier it is for the parents and the children to duplicate the learning and insight they require into their own private lives.

A family stress center is not a resident facility. It provides services on a regular and emergency basis. The primary concern is always for the safety of the children and the goal is to return the children to their home as soon as it is safe to do so. The intent is to restore the family as the basic unit of child raising whenever possible.

The following types of families are treated: Child abuse or neglect as the presenting problem, where children are currently in the home or may be returned from placement shortly. Where most children are preadolescent and counseling is either requested or required by the court. The centers do not accept psychotic or highly delinquent families.

The majority of referrals are from DPSS, hospitals, courts and police or probation departments. But, it's extremely important to know that at Cedar House many of the referrals are from people themselves. They are self-referred. And, that is very important because it means that they see the center as a safe and possible place for them to seek help on their own before their family has come to the attention of the courts and the authorities.

The maximum case load in any given time is 42 families or approximately 130 to 140 men, women, and children. A wide range of services are offered on a regular basis. They include individual and family counseling, couples counseling, a mother's group, group therapy, a 24-hour response line, parent's education classes and I'd like to point out that in the current report that we have on this stress center after its pilot program of 6 months, one of the most requested services by people themselves was for a parent education class and I think that's important to know. They recognize that they desperately need those specific skills.

Child development programs, play therapy, crises nursery, homemakers services, a volunteer program, and advocacy with legal, economic, or a dilemma program. The entire program on a yearly basis fully staffed is budgeted at only $200,000. In view of some of the fol-

lowing statistics we believe the ICAN family center program is amazingly cost effective.

Last year, I am told, there were approximately 27,000 reported cases of child abuse and neglect in Los Angeles County involving in upwards of 50,000 children. As of February 1980 there are 9,422 children in placement through the department of public social services; specifically because of abuse and neglect.

During the course of a year it is estimated at approximately 13,000 to 14,000 children in Los Angeles County will have to be placed outside their homes for their own safety. This figure does not include those children who are adopted or delinquent.

The 1980 budget for foster board and care in Los Angeles County alone is $66 million dollars not including administrative or medical costs.

When the human suffering and the staggering costs are added up, the scope of this problem in just one major county is phenomenal. The real tragedy, however, remains.

Unfortunately putting a child in placement does not necessarily mean that families who could be rehabilitated and united once more, yet the need is long-term help.

Placement in the foster home or other resident facilities does not solve the problem of child abuse, even though it temporarily provides physical safety for the child. The fact remains that the family itself, the family from which that child came has not changed except for the band between parents and children has been broken. The child may be blamed for the family's public embarrassment when realistic hope for future positive relationships between existing family members may become an unachievable goal.

While we recognize that some family environments are so filled with violence and neglect the children may never return, we also believe that the major source of hope for a long-term solution is to reeducate, resocialize and eventually restore the family unit.

Obviously the dimensions of the problem will not be solved by one family stress center, but it is the model for the future, and the results can be duplicated in any part of the country.

No single institution or Government agency can possibly deal effectively with over 1 million abused children and their families every year; year after year.

We must, and several people have stressed before me, and I'm sure you will hear it stressed many times again before these hearings are over, we simply must have educational programs before young people become parents and to dispel the myth that the skills of adequate parenting are equivalent to the natural biological process of bearing children.

We know that parenting skills are learned behaviors. The neighborhood family center is a safe place where parents have a chance to learn those skills while simultaneously addressing themselves to their own personal problems. In the program they gain a understanding of the real relationship between them and their children.

It is also a place for the children to receive therapy, understanding and encouragement. A place, where possibly for the first time in their lives the children are treated as valuable important people with legitimate needs and feelings and fears. The ICAN Council, ICAN As-

sociates and the innovative nontraditional ICAN program at Cedar House represent a model we believe that can be replicated throughout the country.

On behalf of all of us working toward a solution of child abuse, I thank you very much for this opportunity.

Mr. VAN DE KAMP. Mr. Chairman, we'd like to leave with you today some printed material about ICAN and ICAN Associates, and the treatment programs so that it might be included in the record.

Mr. CORMAN. We'd be pleased to have excerpts from the material included in the record.

[The material follows:]

PROPOSAL

TO CREATE NEIGHBORHOOD CENTERS WHICH OFFER A COMPLETE SPECTRUM OF PUBLIC AND PRIVATE SERVICES (DIRECT, CONTRACTED, OR REFERRED) TO ABUSING AND POTENTIALLY ABUSING FAMILIES IN THEIR OWN COMMUNITIES ON A 24-HOUR BASIS.

The specific program proposed would be for the establishment of twelve (12) neighborhood family stress centers, each offering a complete spectrum of public and private services to abusing and potentially abusing families on a 24-hour basis. Each center would be locally administered, and funding would be provided to each by a private corporation. In-kind professional services would be provided by public agencies such as DPSS, Law Enforcement, Health Services, and Mental Health

The centers would facilitate the provision of maximum protection for children with minimum disruption of the family unit. They would provide a locally accessible resource for families who would receive a continuum of comprehensive, protective, preventive, and treatment services. The continuum of services is a major importance in that abusing and potentially abusing families, often isolated and reluctant to seek help, are ill-equipped to follow through with a complicated and segmented program involving multiple referrals and disconnected treatment efforts.

In summary, a system of coordinated services is proposed:

A. To meet emergency needs of children and their families in crisis, providing options in care which will protect children and reduce the trauma induced by the crisis.

B. To prevent child abuse and neglect by encouraging self-referrals and providing early preventive services to vulnerable families.

C. To provide a continuum of locally accessible multi-disciplinary services available on a 24-hour basis.

D. To provide a vehicle for cooperative interaction between public and private agencies.

E. To meet long range treatment needs of abusing families.

SERVICES FOR PREVENTION AND TREATMENT OF CHILD ABUSE AND NEGLECT *

A full spectrum of multi-disciplinary services, public and private, would be available via each neighborhood family stress center. The services provided directly by center staff would vary from center to center according to the current availability of services in the community. If an identified service is already available within the community, the center would refer or contract to the existing provider to avoid unnecessary duplication of resources. However, it must be emphasized that the service center would maintain ties with the family to provide support, follow up, and transportation if necessary.

The following services are considered essential components of each center's program, whether direct, contracted, or referred:

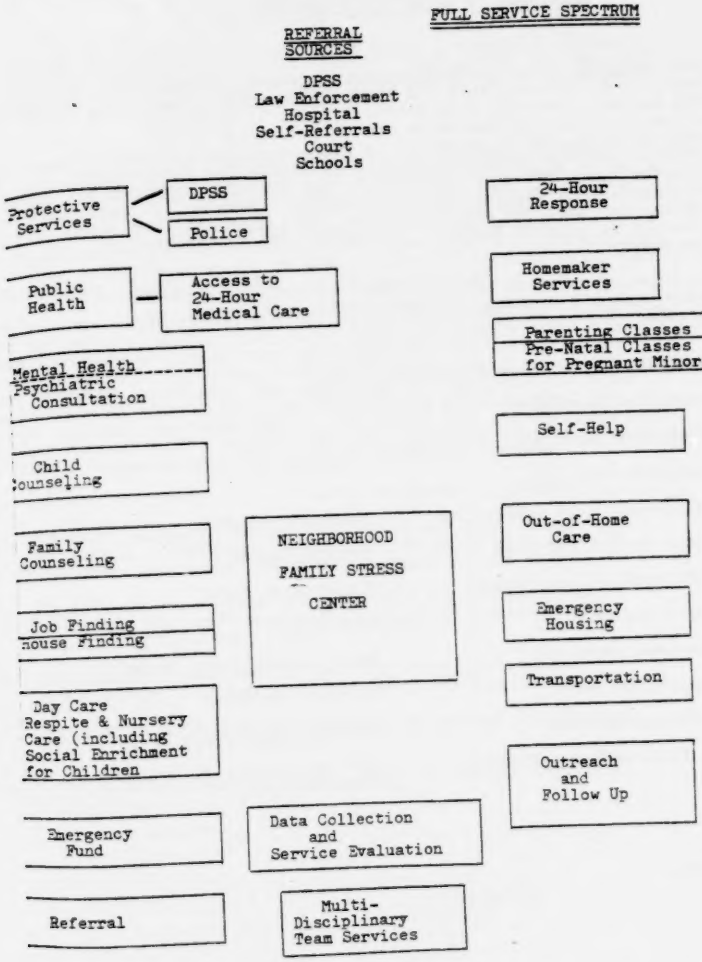
- Twenty-Four (24)-Hour Response
- Preventive Services
- Protective Services
- Treatment Services

Family and Child Counseling	Emergency Housing
Mental Health Services	Transportation
Psychiatric Consultation	Out-of-Home Care
Public Health	Self-Help
Homemaker Services	Multi-Disciplinary Teams
Respite Day Care	Referral Services
Parenting Classes	Outreach and Follow Up
Job Finding/House Finding	Data Collection and Service Evaluation

*Exhibit A

EXHIBIT A

FULL SERVICE SPECTRUM



Mr. VAN DE KAMP. Thank you. I'd just like to add to something that Christina just said because I believe it needs to be emphasized.

As a prosecutor I see defendants charged with child abuse who were abused themselves.

Many of those that we end up charging with criminal acts of violence were abused children. Christina is one of the lucky ones. She's here today seeking redemption for some of those children. She's fortunately in a position where she can speak out about her own experience and talk of preventive measures we can take. But there are many others who cannot break that cycle. Breaking that cycle is an important thing to do.

And second, while it's unrelated to child abuse per se, as district attorney of this county engaged in enforcing child support payment orders, I know that this bill has in it the potential for funding the non-welfare types of child support enforcement. The Senate bill provides for the funding of that function. We now have funding, at least on a temporary basis, until you resolve this issue. I urge you to support the funding of nonwelfare child support enforcement because it leads to the reduction of welfare costs, since through enforcement of those cases we're able to keep many women off of welfare.

Mr. CORMAN. Thank you, John, on that point. The enforcement is a big issue. I suspect that if we look at the range of title XX services, such as emergency shelters and other services related to child abuse and neglect, that such services must not be limited to only those who receive public assistance.

John?

Mr. ROUSSELOT. Mr. Chairman. Thank you both for your testimony and for sharing your experience with us. It is of interest and I'm sure helpful to this committee.

John, are you familiar with the recommendations of the Committee for Public Social Services that we got today?

Mr. VAN DE KAMP. I got it early this morning.

Mr. ROUSSELOT. Oh. It's new to you too. There is a recommendation that you, the district attorney, should be encouraged to train some members of existing staff to specialize in the prosecution of child abuse cases. Now you've already mentioned that you have a special unit.

Mr. VAN DE KAMP. I'd like to relate to that: We have just created a manual which is going to every deputy district attorney. It's one of the best manuals for the handling of child abuse and domestic violence cases that's ever been produced. We've just held a training program about 3 weeks ago involving 150 to 200 deputy district attorneys using that manual to try to bring them up to speed in this area.

In short, we beat the report to the punch.

Mr. ROUSSELOT. When you anticipated something happening?

Mr. VAN DE KAMP. Well, I'd like to think we were moving in the same direction.

Mr. ROUSSELOT. Well, it's nice to know that your action anticipated this report even though you're just seeing it today.

Mrs. Koontz, you mentioned the fact that you felt that Cedar Hall was a model for other areas.

Mrs. KOONTZ. That's right.

Mr. ROUSSELOT. We could emulate the Cedar Hall program all over the country. You got into the issues of cost effectiveness and why you

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felt that this kind of facility was more cost effective than others. What comparisons are you making?

Mrs. KOONTZ. Well, for instance compared to the other—the other alternatives. The rate of reabuse among the clients at Cedar House is extremely low. In the pilot program there was only one child, I believe, in—it's in the report that you will be getting. I believe out of the 42 families only one child was abused during that period of time.

Several children were returned from placement as a result. The families were being reunited in such a way that—it's interesting to note that their educational and economic level was substantially above moderate, $15,000 to $20,000 a year income and also educational levels which included many college-educated whites.

The fact of the matter was that the families were functioning so badly that many of them who had that kind of education and learning capacities were also on public assistance and welfare of some sort because they simply did not have the skills necessary to continue running their families in a positive and healthy way. So, what they had to seek public assistance their children were taken away from them——

Mr. ROUSSELOT. Even though they were in the higher income levels?

Mrs. KOONTZ. Even though they had been at one time in a higher income level.

Mr. CORMAN. At one time.

Mrs. KOONTZ. Yes. Yes. They had in other words potential earning capacity and educational levels which should have placed them above that but their own personal problems and difficulties and lack of skills in maintaining a proper home had brought them to a very different kind of circumstances.

Mr. VAN DE KAMP. I would add this for the Congressmen.

Mr. ROUSSELOT. We're always interested in anything that's cost effective.

Mr. VAN DE KAMP. It's a fair question and the program however is still under review——

Mr. ROUSSELOT. Yes.

Mr. VAN DE KAMP [continuing]. As it started in about July 1979. It's not really finished its first year, and we only have an interim report to give you. Its goals obviously were good. From a governmental standpoint it's great because it hasn't cost a dime. I believe the early indications are positive.

It will take a period of time to get the numbers, the cost per client, and to assess its impact; the full first year report will tell us a lot more.

Mr. ROUSSELOT. Well, maybe we can receive a first annual report or something.

Mr. VAN DE KAMP. Yes.

Mr. ROUSSELOT. It always triggers great interest when you talk about cost effectiveness. This is a terrible problem we have with the Federal Government; I'm sure you know we operate in the deficit position most of the time.

So, we're always interested in cost effectiveness.

Mrs. KOONTZ. Most of us anyway.

Mr. ROUSSELOT. I was interested, Mrs. Koontz, in your comment about the parent education program, how absolutely essential that had become. You put it up front as to what you felt to be a major part of

what success you've had in the relatively short time Cedar Hall has been in operation.

Do you think we should be stressing the matter more in the federally funded parts of this program?

Mrs. KOONTZ. Yes; I do. And, on two levels. First of all, the families at Cedar House are identified as being abusive families. They are already in the process of trying to cope with the problem of child abuse. It's already happened. It is particularly significant I think that those families themselves identify one of their greatest feats other than therapy as being education in parenting and in running a home. That includes everything in how to deal more effectively with your own rage, their own anger, problems with your children, or a realistic expectations from say a 2-year-old as opposed to a 7- or 8-year old; how to communicate with their children.

The entire spectrum of this—the human skills of parenting coupled with of course some idea of budgeting, how to cook, how to clean, how to run a home.

Mr. ROUSSELOT. That's your program.

Mrs. KOONTZ. It is many different types of skills that are required and at least some minimal level and what we have found of course is that many families involved in abuse also have very low skills in those other areas. That's why our program provides for homemakers service, somebody to go actually into the client's home and help them set up a logical routine, help them learn how to shop on a budget and that kind of thing.

Now in terms of education in the schools, you're talking about prevention. You're talking about a completely different kind of program. Those are young people who hopefully are not involved in the child abuse and it gives them a better expectation of what a very difficult and complex job parenting is, and does not lead them to believe just because bearing children is a natural biological process that the skills needed to run a home and have a family and be a parent will also come naturally and I think a lot of people have those kinds of expectations.

So, I think you're talking about two separate things: One, the parenting class for those families who are involved in abuse coupled with intensive therapy programs, both individual and group and with the children; and then you're talking about a separate and hopefully the kind of educational process that will prevent these families from occurring and coming in contact with the system.

Mr. ROUSSELOT. Well, I was fascinated with your comment of how essential the parent education program is. Of course it's a voluntary program.

Mrs. KOONTZ. Oh, yes. But it is—the reason that it was expanded and decentered was because of the kind of requests from the families themselves.

Once the crisis had abated and they began talking and seeing therapists they came to the realization themselves in very large numbers that this was something that they needed and had never been able to admit that they needed before.

Mr. ROUSSELOT. John, do you think that in the case where you've got potential criminal prosecution, among other things, that at least part

of the program could be a requirement that the parent is totally involved in parent education programs?

I remember when we got traffic tickets in our younger years, the judge would require us to do something on a voluntary basis, rather than pay the money or go to jail, usually a driver education program.

Do you think that's possible in this kind of thing?

Mr. VAN DE KAMP. Yes.

Mr. ROUSSELOT. You've got some leverage of potential prosecution——

Mr. VAN DE KAMP. Sure.

Mr. ROUSSELOT. Potential prosecution——

Mr. VAN DE KAMP. That's one of the advantages of prosecution work because you can put somebody on probation and create conditions of probation suitable to a particular offender.

Mr. ROUSSELOT. Yes. How long did that take—the time frame?

Mr. VAN DE KAMP. My guess would be that——

Mr. ROUSSELOT. All those agencies for—it sounds as though it would take forever and ever.

Mr. VAN DE KAMP. For a case of that sort, the criminal process will prove to be slowest. It will probably take about 6 months before all those things happen.

Mr. ROUSSELOT. Felony——

Mr. VAN DE KAMP. There was a plea of guilty in the case; if it was going to trial it could have taken longer.

Mr. ROUSSELOT. The father had admitted that he——

Mr. VAN DE KAMP. That's right.

It went smoothly only because the people were cooperative. I might say then when it comes to crisis intervention, the DPSS will move swiftly with respect to tending the child.

Mr. ROUSSELOT. Thank you.

Mr. CORMAN. Thank you both very much for your contribution.

Our next panel is Barbara Hanna, specialist, psychiatric social worker, Los Angeles County Unified School District, member, Region I, United Way, Child Abuse Council, and Sue Brock, president, California Children's Lobby.

We'll recess the hearing for 5 minutes while the panel sets up.

[A recess of 5 minutes was taken at 10:15 a.m.]

Mr. CORMAN. The subcommittee will resume the hearing.

We are pleased to welcome Barbara Hanna and Sue Brock to this committee today.

STATEMENT OF BARBARA HANNA, SPECIALIST, PSYCHIATRIC SOCIAL WORKER, LOS ANGELES COUNTY UNIFIED SCHOOL DISTRICT, MEMBER, REGION I, UNITED WAY, CHILD ABUSE COUNCIL

Mrs. HANNA. Thank you.

It's a pleasure to be here. I really represent two places today. First, I was asked to talk on behalf of the Region I, United Way Planning Council and the Child Abuse Council of that planning council and some of the community services that we have been involved in and after that, as a Los Angeles County Unified School authority for the Children's Center program.

I'll be discussing issues on that also resulting from the community needs assessment done by the United Way, Region I, Planning Council, published in 1977.

Protection from neglect, abuse and exploitation was determined to be a top priority, both as a community need and for the United Way funding.

Out of this the United Way, Region I, Child Abuse Council which it sought to address its needs. Some of the ways in which the Child Abuse Council has functioned are included here.

The first one has been to focus on communication—community education and awareness. We haven't tried to create an impression that there is an abused child in every home but we have tried to help the community be aware that it is more prevalent than we care to think and that the cost is very great at that level.

We have had community conferences and workshops on the requirement of reporting and this included what the law requires regarding who must report, when, how, and the process by which reports are handled.

We also will have a program on sexual abuse; what it involves and how various professional people address it. Particularly critical is the issue involving the child having to present testimony.

Another workshop has been on the emotional abuse—its various aspects, things to watch for, ways to address it. What is emotional abuse, where is the fine line between punishment and abuse. This extends into another additional issue, parents versus children's rights which has already been mentioned today.

We also have had a conference on child abuse and the justice system, of the role of courts in child abuse and neglect.

Besides the community programs that we have presented we've encouraged and endorsed agencies which have sought to establish programs addressed to this issue. Later on, I understand you'll be hearing from two of the agencies that are in the valley; that is, the Children's Bureau Family Crisis House and Family Stress Centers, that is with the San Fernando Valley child guidance program.

We've also sought to keep abreast of legislation and disseminate information about it to community groups and organizations. We do take up proposed legislation for study and recommendation and several of us have been asked as individuals to consult and to testify at the State level on some bills.

We've also sought to facilitate a case conference type of opportunity, for professionals to share their experiences and thereby to improve their own skills in working with someone who's involved with abuse and neglect. Just to recognize that one of the difficult things about professionals working with abusing families is the need for the professionals to have a support system.

We've also sought to involve both the private and public sector in our planning including DPSS and protective services, education, law enforcement and the courts, and mental health agencies.

This effort to involve the public and private sector in interaction and dialog is to promote more effective community efforts to address this serious problem.

We have sought to maintain coordination of public agencies that provide services to victims of child abuse. One of our methods of estab-

lishing and updating such linkages is the publication of a booklet listing and describing treatment services in our geographic area. I'd like to leave a copy of that with you today.

In a way it sounds like some of the things are similar to those that the ICAN Committee does but ours is very much on the local level.

When we do our programs, we ask for evaluations back from the participants about things that they think are needed. I'd like to share with you some of the things that have come to our attention as needs and recommendations.

We'd like to encourage law enforcement, particularly local police departments to develop specialized staff to deal with child abuse cases. Los Angeles Police Department and Sheriff's Department have some very fine and sensitive staff who are trained for this. Having law enforcement people with specialized skills in the areas of family violence and child abuse makes a tremendous difference.

We'd also like to encourage and support the maintenance of high professional standards in the protective services division of the public welfare services; caseworkers need to be MSW level.

We urge that the private, nonprofit sector be encouraged and funded to play a significant role in delivering services to families involved with violence, abuse, and neglect. They play an important part in being able to quickly address the needs of these families, at all economic levels with sensitivity and a high level of professionalism. You will be hearing from some of them who do family counseling, placement, and provide residential care.

One other note in concluding this aspect of my presentation is that there seems to be some negative attitudes toward foster placement in particular. Horror stories can of course be found and should not be ignored. But a backlash against foster placement would be a great disservice to our community.

There are many fine foster homes where abused and neglected children have gotten a new direction for their lives. This program is still much needed. Efforts that would undermine this needed service should be avoided. Only those steps that would seek to improve it as a part of the service continuum should be encouraged.

In other areas of concern that we are looking into the future to address are three: No. 1, respite child care; No. 2, expansion of parent education to occur at various critical points in a person's life; and, No. 3, identification of services that are needed by the single father. In most instances it is the single mother that gets the attention. Our experience in children's centers is showing that the number of fathers who are having the responsibility of care for the children is increasing and maybe their needs might be different. This certainly should be addressed.

We believe planning and coordinating services is an important function and that it is an appropriate service for public funding. We recognize that no one service or single agency can effectively combat the issue of child abuse and neglect. Therefore it is essential that programed emphasis is required for the interface of various disciplines of services.

Because I'm working in the public school system I have been asked to tell about my personal responsibility and views in identifying needs and means of preventing abuse and neglect to children.

First, let me just briefly identify my role. I'm responsible for directing and developing the mental health and social services for the 90-

day care centers that are administered by the Los Angeles Unified School District. So, my remarks really come from my experience there. I would not want to speak for the whole school district.

Mr. CORMAN. May I ask, is that the city school or is that the county school?

Mrs. HANNA. The city.

Mr. CORMAN. All right.

Mrs. HANNA. On the issue of our role of identification it's clear that we must—as it's spelled out in California law—we must report. However, in order to really implement this, the first step of actually knowing how to do it is the training of staff.

In the children's center program, training for child abuse and neglect prevention began in 1975. The first activity of course is our consciousness raising with the 90 site administrators about their responsibilities to report nonaccidental injuries of minors. From 1975–78 further training involved the use of the community resources, including participation by the public social service, law enforcement, and Parents Anonymous, providing more indepth understanding of the roles these agencies play in child abuse and neglect prevention. Since that time I think it's significant to note that reports made by children's center staff have increased substantially.

This increased reporting, though, has surfaced a major problem. The less—put this in quotes—"the less serious incidents" such as belt marks, minor burns and abrasions get little attention by agencies to whom reports must be made because of the limited available services that must focus on the most serious situations. I'm very concerned with that; early identification and intervention remains a concept. In order to make this concept become a reality, more primary prevention services are a must.

The centers also accept children who are referred by DPSS for their protection and to prevent or remediate the effect of abuse or neglect. I wanted to underline this as something I've noticed in the bill as a very positive part of it; not only for parents needing day care to work but to use day care as therapeutic environment for child development services. I think day care as a healing, reconstructive experience is not always seen as an avenue for treatment.

For children in our centers that are referred by DPSS, the mental health worker, the site administrator and the DPSS services worker meet together with the family to plan for the child's entry and for further services that may be needed. This often includes involving the parent directly in the daily center program which I think is very beneficial.

The schools are often thought of as a place to meet a variety of needs for children and families. Again, making the concept become a reality takes careful assessment of the situation, need, and provision of resources for such implementation.

[The prepared statement follows:]

STATEMENT OF BARBARA HANNA

BACKGROUND

Resulting from a community Needs Assessment done by the United Way Region I Planning Council, published in 1977, Protection from Neglect, Abuse and Exploitation was determined to be a top priority both as a community need and for United Way funding. Out of this grew the United Way Region I Child Abuse Council which has sought to address this need.

WAYS IN WHICH THE CHILD ABUSE COUNCIL HAS FUNCTIONED

1. Community education and awareness has been a major focus. We have no tried to create the impression that there is an abused child in every home, bu we have tried to help community to be aware that it is more prevalent than w care to think and that it crosses every economic level. We have held community conferences and workshops on:

(*a*) *Reporting.*—What the law requires regarding who must report, when and how, and the process by which reports are handled.

(*b*) *Sexual Abuse.*—What it involves and how various professional people address it. Particularly critical is the issue of involving the child-victim i presenting testimony.

(*c*) *Emotional Abuse.*—Its various aspects, things to watch for, ways t address it. What is emotional abuse, where is the fine line between punish ment and abuse to what extent is this an issue of parents vs. children' rights.

(*a*) *Child Abuse and the Justice System.*—On the role of the courts i child abuse and neglect.

2. We have encouraged and endorsed agencies which have sought to establish programs addressing this issue. Later on, I understand you will be hearing from the Children's Bureau and the San Fernando Valley Child Guidance Clinic about their programs in the San Fernando Valley.

3. We have sought to keep abreast of legislation and disseminate information about it to community groups and organizations. We do take up proposed legislation for study and recommendation and several of us have been asked as individuals to consult or testify on specific bills.

4. We have sought to facilitate a "case conference" type of opportunity for professionals working with families involved with abuse and neglect to enable professionals to share their experiences and thereby to improve their own skills.

5. We have sought to involve the public sector: D.P.S.S. and Protective Services; Education; Law Enforcement and the courts, along with the private sector in inter-action and dialogue to promote more effective community efforts to address this serious problem.

6. We have sought to maintain coordination among private and public agencies that provide services to victims of child abuse. One of our methods of establishing and updating such linkages has been the publication of a booklet listing and describing treatment services in our geographic area.

SOME OF THE THINGS WE HAVE LEARNED THAT WE WOULD LIKE TO SHARE WITH YOU AS YOU PREPARE TO ADDRESS THIS MATTER ON A NATIONAL LEVEL

1. Encourage law enforcement, particularly local police departments, to develop specialized staff to deal with child abuse cases. The L.A.P.D. and Sheriff's Department have some very fine and sensitive staff who are trained for this. Everyone knows the frustration and sensitivity that is involved with family violence and the law. Having law enforcement people with specialized skills in the areas of family violence and child abuse make a tremendous difference.

2. Encourage and support the maintenance of high professional standards in the Protective Services Division of Public Welfare Services.

3. We urge that the private, non-profit sector be encouraged and funded to play a significant role in delivering services to families involved with violence, abuse and neglect. They play an important part in being able to quickly address the needs of these families, at all economic levels, with sensitivity and a high level of professionalism. You will be hearing from some of them who do family counseling, placement, provide residential care. Many of them do it with broad community support both through Board participation and financially through United Way support.

4. One other note, in concluding, in some areas I sense a negative attitude toward placement (foster care in particular). Horror stories of course can be found and should not be ignored. But a backlash against foster placement would be a great disservice to our community. There are many fine foster homes where abused and neglected children have gotten a new direction for their lives. Years of hard work have gone into recruiting foster parents with a high standard of performance. This program is still much needed. Efforts that would undermine this needed service should be avoided. Only those steps that would seek to improve it should be encouraged.

5. Other areas of concern we are now seeking to address are: Respite Child Care coupled with parenting education and how it might be implemented as a preventive measure. Also, service to the father who may be trying to deal with this. The major focus has generally been on the mother.

6. We believe the function of planning and coordinating services is an important function and it is an appropriate service for public funding.

7. Because I am in the public school system, I would briefly like to describe to you what our system is doing in relation to this concern.

EARLY INTERVENTION FOR THE PREVENTION OF CHILD ABUSE AND NEGLECT

Training for child abuse and neglect prevention began in the Los Angeles City School Children's Center Program in 1975. The first activities focused on consciousness raising with the 90 site administrators about their responsibility to report non-accidental injuries of minors. From 1975 to 1978, further training involved the use of community resources including the Department of Public Social Services, law enforcement and Parents Anonymous to provide more in depth understanding of the role of these agencies in child abuse and neglect prevention. Since that time reports made by children's center staff have increased substantially. This increased reporting has surfaced a major problem. The "less serious" incidents, i.e., belt marks, minor burns and abrasions, get little attention because the limited available services must focus on the most serious situations. Therefore, early identification and intervention remains a concept. In order to make this concept become a reality, more primary prevention services are a must.

Mr. Corman. Thank you very much Mrs. Hanna.

STATEMENT OF SUE BROCK, PRESIDENT, CALIFORNIA CHILDREN'S LOBBY

Ms. Brock. My name is Sue Brock. I'm the president of the California Children's Lobby. I'm very pleased to be here; very pleased to talk about some of the problems of child abuse prevention and foster care.

I want to start by briefly outlining the role that the Children's Lobby has played in foster care and child abuse prevention in this State.

Since 1971 we have conducted research projects, looked at what was happening with the children in this State with regard to foster placement and child abuse programs, and in 1976 the Children's Lobby was able to secure passage of Senate bill 30, the Family Protection Act, a California statute of which I know you are aware.

This bill was funded for pilot projects in two counties, San Mateo and Shasta. These projects are models that we need to take a very critical look at in terms of the importance of maintaining families, reunifying families wherever possible and, when that is not possible, attempting to have the parent relinquish custody in order to have the child adopted, placed in subverted guardianship or in long-term foster placement.

For the first time in California with the Family Protection Act we have had a statewide family policy and I think the reason we all believe that H.R. 3434 is so important is that it would constitute a national policy on how we deal with families in crisis. In California, prior to the passage of the Family Protection Act, each of the 58 counties dealt with child abuse and foster placement in 58 different ways. There now is wide support for the Family Protection Act policy in California and equally wide support for the national policy outlined in H.R. 3434. We are very pleased with the courageous leader-

ship of this committee in this area and with the tremendous staff work that has gone into this bill.

We would like to recommend that this committee study the ongoing and current reports of California's Family Protection Act pilot projects. The most current report will be available in a few weeks. I think it would be very wise to take a hard look at our experience in California in those two counties; specifically with regard to what the staff in those counties have tried to do.

Both projects are administered by the county welfare department. Attempts have been made to isolate those children and those families who would benefit from family protection services and family reunification services.

The project staffs have also tried to look at the characteristics of those families and children who would not benefit dramatically from family reunification services—those families who are still unable to live together after provision of service. The projects have had to look at what these families and children need—what services are required to facilitate adoption, subvented guardianship, or long-term foster placement.

We don't believe that there is an immediate cost savings with this service approach. But we do feel that after 5 or 6 years there is a dramatic cost savings. We know that in the long run this approach is cost effective. In one area alone, according to the most recent auditor general study in California, two-thirds of the children in foster care remain there for their entire childhood lives. So keeping families together, whenever possible, is a very cost-effective thing to do in terms of foster care savings alone.

We also know from a recent study that three-quarters of the children in the Alameda County Juvenile Hall are foster placement failures. We know from social workers in California that one of the most compelling reasons for these foster care failures as well as for our current inability to keep families intact is excessive caseloads and inadequate training of the workers.

We know that in Fresno County, for example, the caseload for a social worker is 90 children. We also know that of the 22 social workers in Fresno, only 1 has a masters degree in social work; 21 of the 22 people who have a caseload of 90 families do not have training in social work with any advanced degree. If we are to deal with families effectively by bringing a variety of services together we're going to have to have well-trained people. We will have to pay for the services that are required but in the long run this approach will be very cost effective and very beneficial.

We'd like to commend you and thank you for your leadership which is especially courageous in these times of limited fiscal resources both in California and across the country. We want you to know we will be working very hard for the passage of this important legislation.

Mr. CORMAN. Ladies, thank you very much. Mr. Rousselot?

Mr. ROUSSELOT. Thank you, Mr. Chairman.

Miss Brock, let me be sure that I understand. The 2-year report that will soon be out, is that primarily or exclusively just the two pilot counties?

Ms. BROCK. The report deals with the 2 pilot counties using control data from 11 other counties as well.

Mr. ROUSSELOT. All right.

Ms. BROCK. There is a control—

Mr. ROUSSELOT. OK. Well I'm informed by the chairman that someone will testify from one of those counties.

Ms. BROCK. That's right.

Mr. ROUSSELOT. So it is broader than just the two pilot counties. The pilot has been going on 2 years?

Ms. BROCK. The pilot has been going on for 2 years and has been considered effective. The State department of social services in their proposed State social service plan for parents and children have used the Senate 30 Family Protection Act as a model for the entire State.

Mr. ROUSSELOT. Now, how much input will be received from the 11 other counties for the report?

Ms. BROCK. The 11 other counties have been asked for data on caseloads, service provision, the number of referrals made, et cetera, without the benefit of the pilot——

Mr. ROUSSELOT. Right.

Ms. BROCK. Only Shasta and San Mateo Counties have these programs underway.

Mr. ROUSSELOT. My comment on the cost effectiveness primarily related, without sounding defensive, because I'm not, but primarily it relates to the way we monitor and watch Federal funding and I just——

Ms. BROCK. I know.

Mr. ROUSSELOT [continuing]. Don't think our oversight is always too good. Of course it's improved now that Jim and I are watching it carefully. How many members do you have, approximately?

Ms. BROCK. Right now there are about 900 members.

Mr. ROUSSELOT. 900 statewide?

Ms. BROCK. Yes.

Mr. ROUSSELOT. No Federal funding?

Ms. BROCK. No funding of any kind and——

Mr. ROUSSELOT. Congratulations.

I wonder since you have emphasized the necessity of maintaining the family unit, finding the way to have the child remain part of the family unit rather than spinning him off to foster care, is that——

Ms. BROCK. It is possible.

Mr. ROUSSELOT. Right. Do you think that was stressed or has it been stressed in the 2-year pilot program in the two counties?

Ms. BROCK. Yes; I do. Absolutely.

One of the things emphasized by the Family Protection Act and stressed by almost every speaker today is the benefit and necessity of providing support services when family maintenance or reunification is possible—services such as child care and health maintenance. We have found that the provision of child day care services to families in crisis is often a first step in keeping families intact. We found that lack of child care tends to be one of the major stress factors for families.

Mr. ROUSSELOT. How so?

Ms. BROCK. A family is usually unable to accept or maintain employment or training if there's no child care available. Without child care, a parent is unable to work and often blames the child for the larger dilemma.

Mr. ROUSSELOT. Excuse?

Ms. BROCK. Oh, I'm sorry.

Mr. ROUSSELOT. It is an excuse.

Ms. BROCK. It's a reason. It's very distressful not having a place to leave you child when you need to go to work.

We have also learned with another child abuse prevention and treatment project with which I work, located in Humboldt County and the Watts area of Los Anegeles, that there are severe unmet medical needs among virtually all of the families receiving the services. Unmet health needs add to the families' stress level, and must be addressed in any family's service plan.

We have also learned from the first 2 years of the Humboldt project that families want and seek help. Humboldt has had a 60-percent self-referral rate among its families. With the counseling and support services provided, this project has experienced a mere 2-percent recidivists rate, which makes this project very effective.

It takes money to hire trained people to work with a family. And when foster care is warranted it takes a placement worker with some skill and training to work out a services plan for the child and the family.

These programs can work for families. They may appear expensive at the outset. But we believe in the long run, both in human and fiscal terms, the programs are sound—they are the right thing to do.

Mr. ROUSSELOT. Thank you both for testifying.

Mr. CORMAN. I wanted to ask one question. As a Los Angeles high school district, we instituted a program and it bombed out in some 11 or 12 years.

I am uncertain about this. It has to do with inflicting physical pain as a means of establishing discipline, and I know that in the Marine Corps nearly 40 years ago they had just given that up as a means of maintaining discipline.

Recent Supreme Court cases have prohibited its use in Federal institutions. I wonder what conception of abuse the institution of the Los Angeles school district holds. Do you have any comment about the positive or negative aspects?

Ms. BROCK. We can both comment. She's a little more on the hook, as you well know.

Mr. CORMAN. I don't want to put her on the hook. I'm not trying to start a war with the school board, because they have a problem. However, I would state that we have prohibited its use in dealing with some very stressful circumstances. There's a certain stress about being in the Marine Corps in combat and we have some very tough people to manage the Federal prisons. Now in those circumstances, it is not a means available to discipline people but we say it is in the Los Angeles City Schools.

Mrs. HANNA. Let me speak primarily of the child development division because we have taken a little bit different look at it. Since we're providing child development services for families, we feel that some of our responsibilities are to help families find positive ways of disciplining. This involves seeing discipline as something that is established over a period of time, not just a reaction to certain kinds of

unwanted behavior. In the children's program we do not use physical punishment or support parents' use of it. And we also feel as you do, it gives a double message to the parents.

If we can do it and they can't, that doesn't make sense. Corporal punishment isn't discipline, it's punishment; and does not teach, it angers and hurts.

Ms. BROCK. I would add one thing that is the Children's Lobby has been vehemently opposed over punishment in the school system with exception to one. We feel this way in part because we know from every expert in the field who's ever worked with it that abuse is a learned behavior pattern and striking the child leaves the child to believe that that is the normal practice, that that is the way that someone indicates they care for him, that is the way he will be with his own children. We know that to be a fact.

So, we've been opposed to the use of corporal punishment on the psyche of children and on the part of the schools, knowing that there must be another way to get around to the treatment of children.

Mr. CORMAN. Thank you.

Mr. ROUSSELOT. Mr. Chairman, I am interessted in the problem about your giving the educational statistics, I think in Fresno County, the two caseworkers that you had——

Ms. BROCK. One.

Mr. ROUSSELOT. One had an MBA.

Ms. BROCK. No. One had a masters in social work and——

Mr. ROUSSELOT. I'm sure you weren't trying to imply that you can't be a good social worker if you don't have a high degree or something like that.

Ms. BROCK. Not in the least.

Mr. ROUSSELOT. And you know that in our bill we require the Federal effort by the State and local agencies to determine the priority staff, things we need and provide increased Federal funding for staff development, and training programs but we don't necessarily——

Ms. BROCK. I couldn't agree with you more.

Mr. ROUSSELOT [continuing]. Require a high degree——

Ms. BROCK. I couldn't agree with you more. But social work staff need training because the work is extremely sensitive and demanding, especially when the case load is 90 children. Many counties that have not been able to provide the necessary training and some social workers come to their jobs without any background and are handed 90 case files——

Mr. ROUSSELOT. You mean brand new employees?

Ms. BROCK. Yes.

Mr. ROUSSELOT. What about experience?

Ms. BROCK. Many don't have any.

Mr. ROUSSELOT. That's all without experience. Ladies, thank you very much for your testimony.

Mr. CORMAN. Ladies, thank you for your contribution.

The next panel can come up while the reporter is changing her paper. Dr. Hershel Swinger, Barbara Flaherty, and Dennis Hart.

Dr. Swinger, we're pleased to welcome your committee of resources.

Mr. SWINGER. Thank you.

STATEMENT OF HERSHEL K. SWINGER, DIRECTOR, REGION IX, CHILD ABUSE AND NEGLECT RESOURCE CENTER

Mr. SWINGER. Congressman Corman and Congressman Rousselot, I'm very pleased to be here this afternoon to talk about some of the indications or some of the factors that we use in the identification and documenting of child abuse and neglect.

I would like to preface my remarks by saying I have a doctorate in clinical psychology from a major university and a number of lesser degrees at different colleges and universities.

I managed to get through that entire educational process without ever having the word child abuse or neglect mentioned to me in any of my professional education. Therefore my education in the area of child abuse and neglect started about 1975 when I became director of the Region IX Child Abuse and Neglect Resource Center; a center designed to service the needs of those in professional agencies and organizations that work directly with child abuse and neglect.

We know for instance a child abuser tends to come from families in which abuse has occurred. We refer to this as the intergenerational generation factor.

We know that frequently perhaps 10 percent of the cases of child abuse and neglect, including the spectrum which contains emotional abuse and sexual abuse as well, tends to happen in the families—where there is a severe mental or emotional disorder and/or drug abuse.

We're also extremely aware of the fact that when you do a comparison anyone who is into the system and you look back on these factors you will find major stress or major serious distress that had to do with the incident that brought them to the attention of the authorities; and finally, families seem to target a particular child or a child that's perceived as special and that particular child in some instances tends to be the child that's abused.

While the numbers are startling I think it's safe to say that the estimates of one-half million to a million, to 2 million, to perhaps 4 million if you count the cases that are reported nationwide are very much in the ballpark. We have found, for instance, that in our resource centers every year that we've been able to compile statistics throughout the DHEW region IX States we've seen an increase with respect to child abuse and neglect every single year and to date those numbers are not going down. We know, for instance, that if you want a profile of the family that's most likely to be identified as abusive you're most likely to find poor people and minority people in that profile. They're reported in the system at a rate of 3 to 1 as compared to nonminority populations. Again, the factor of the family being poor, as we're aware, presents a major stress on those families.

When we review the reporting we see over and over again if we were to pinpoint certain areas you could almost target areas in which there are most likely to be reports of child abuse and neglect inclusive of the spectrum.

Since 1975 I would like to briefly review the kind of feedback or indications based on requests that we got from the center in terms of the level of concern about this problem. In 1975 the majority of the requests we got at the Resource Center had to do with the awareness of the problem. People wanted to know about the problem. It was as

if in 1975 we discovered child abuse and neglect and every PTA, community group, grammar school, social work organization, and problems with the daily living class at the high school level, wanted us to come out and tell them about child abuse and neglect. The second year there seemed to be a great concern about how to identify, who does it, you know, because at that time it was a common accepted attitude and assumption, I believe, that it was something that happened somewhere else to somebody else and it really didn't involve me or my neighborhood and my friends and my relatives. As we started to get more awareness people realized that it was a problem, it was a major problem, that included hundreds of thousands of cases and something had better be done about it. In fact, most families are affected by it directly or indirectly.

In the third year, there was the concern for treatment, we needed treatment. Social workers needed more treatment. The law enforcement personnel realized that a vast majority of the cases, not a majority, but a large number of the cases, are not going to be handled in the criminal justice system and they needed somewhere to refer them so we started to address the need to look for innovative treatment methods.

Finally, in late 1978, 1979 there was a tremendous amount of concern about the problem of sexual abuse. It was as if all of a sudden this problem got out of the closet and what was thought to have happened to 1 in 1 million families in fact it happened to perhaps 17, or 30 percent, or even the estimates as high as 40 percent of all families. Finally in the 1980's or this year, there's an increased attention to the problems related to institutional abuse. So, you get the entire spectrum from people first wondering whether such a problem exists to finally looking at the Government institutions that are set up to deal with this by professionals and people that are making the decisions about how we should respond to the problem.

The consequences of child abuse and neglect; the indirect indications that relate to child abuse and neglect are very well documented. We have data that indicates that 100 percent of the prisoners doing time in San Quentin report that they were abused as children. We find that children that are abused, neglected, mistreated at home have difficulty functioning in the educational system. The delinquency rate relates to the factors of abuse and this includes teenage prostitution and runaways.

The remedial approach to child abuse and neglect we feel has marginal effectiveness because their response is not at the level of primary prevention. One good indication of the type of thing I'm talking about is we know most of the children of alcoholics grow up disproportionately to becoming alcoholics, but the vast majority of our treatment or response programs only relate to the alcoholic, usually the identified alcoholic, and not even the spouse. To give you a handle on that number, it's 25 to 50 percent of the children of alcoholics. So, you can see the lack of attention to vast numbers of abused children simply by dealing with their parents. The affects of this response is that the number of abusive families gradually build on top of the previous generation. We know, for instance, that frequently we hear people say I reported child abuse and neglect and nothing happened—why has nothing happened? Because there are community standards. The

standards of the community applies to identify the abuse and neglect of all sorts seems to be more definite or liberal than the standards that we use in the system, for instance, if I report child abuse and neglect because I think it's happening that person is then referred to a series of professionals who use a measure that's not as liberal as the measure I would make in the report.

Finally, the legal standards are probably the most exacting of all. So, what we have here is the type of situation where individuals are identified as abusive—sometimes self identified as abusive—put into the response system and a goodly percentage of them returned back to the community over and over again where teachers and other interested persons say, "I made a report and nothing happened, why?" I think it has to do with the fact that when we realize that families are in distress that they're most likely to end up in the community where they left, no matter who identified them, eventually, they're coming back home. So, I feel that our present state of knowledge is such that in many communities that we can identify abusive families.

We know it's learned, we know it's caused by stress, we know it happens where drug abuse is found and so on and so on and so forth. There's no problem identifying it; however, the best response to it is still a problem.

Since the number is continuing to go up, it's my guess that the concept of reuniting families runs into a stumbling block because the mechanism designed to really reunite those families does not exist. Over and over again you will see the number of children in foster care going up, up, up and the time it takes to reunite the family may have lifelong negative consequences for that family.

It's my feeling that some of the economic factors relating to H.R. 3434 may help to keep families together for instance when you can't reunite a family because of the number of beds or the amount of food in the home or the amount of—the access to daycare or counseling within the community.

What I'm suggesting to you is that our present clinical knowledge of identifying child abuse and neglect is such that we end up with a good percentage of the people that don't fit the system. The 22 social workers she talked about, Miss Broch talked about, it's my guess that they could probably work effectively with about 85 to 90 percent of the families. They have problems with about 15 percent of their families. But, it's the really entrenched, extremely pathological families that the untrained worker has the most difficulty with and I would guess that a proportion of that population is under much greater stress than the typical family.

It appears that there are certain administrative and economic and therapeutic factors that go with H.R. 3434 that may address the needs of the more severely identified populations at their levels of need.

Mr. CORMAN. Thank you very much, Mrs. Flaherty.

STATEMENT OF BARBARA FLAHERTY, COORDINATOR, CHILD ABUSE SERVICES, LOS ANGELES COUNTY DEPARTMENT OF PUBLIC SOCIAL SERVICES

Mrs. FLAHERTY. I'm Barbara Flaherty, coordinator of child abuse services for the Los Angeles County Department of Public Social Services.

I really would like to talk about what we are experiencing here in Los Angeles County. I think Doctor Swinger covered rather well the infinite variety of child maltreatment that we encounter: sexual abuse, physical abuse, emotional abuse, and neglect of children—not providing them with the basic essentials such as supervision, clothing, food, medical care, and the opportunity for education. All of these kinds of situations come to our attention.

I think throughout the testimony this morning there's been reference to the increased awareness and identification to the problem of child abuse and neglect. We still have a long way to go. We are still facing the issue of people who are unable to interfere with the family. I think Sue Brock referred to this earlier. We are faced with the problem of individuals who are afraid to report or unwilling to report because they do not feel that it will benefit the child—that it may hurt the child rather than benefit the child—because they feel that the child will be removed from the parents when in their opinion the child was only disciplined too severely.

People are afraid to report because of fear for themselves. We still have that problem. They really are not convinced that what they are doing they must do for the best interest of the child. What we have been doing in Los Angeles County to deal with that is to provide a lot of training and education. We continue to need to do that.

We established a child sexual abuse project here in the county which District Attorney Van de Kamp mentioned earlier. That program provides treatment to families where sexual abuse has occurred and treatment to the victims where sexual abuse has occurred. One of the other things that project is doing is a lot of community education—a lot of training of professionals about what sexual abuse is. People are unwilling to believe that children are sexually abused in the family. Now, I know that that sounds hard to believe because we've had so much attention in the media about the problems, but we continue to encounter this. I am continuing to see cases where children try to talk to someone about the fact that they were being abused in the family and the person to whom they went for help was unable or unwilling to believe that this could be occurring with this child. The abuse continued and then later someone listened and believed the child and got help. So, this is an area where I feel that we need to continue to work and provide training and education to the community and to professionals. We've done a lot of that in Los Angeles County via the Interagency Council on Child Abuse, via community child abuse councils like the one in San Fernando Valley and the region 9 project. It's an area we continue to work on.

We have done a lot of media outreach and believe me, do not underestimate the power of television. Whenever we have had any kind of outreach on television regarding child abuse, response has been immediate. Our child abuse hotline received increased referrals. We received calls from parents who have abuse problems wanting to help themselves. We've received calls from children wanting help for themselves.

One of the things that has been addressed throughout this morning's testimony is the parent's need for help in parenting skills. Parents call asking, "Where can I go to get some help on how I'm raising my child? To understand how to manage my child? To be a better

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parent?" Sometimes these calls come in to us from parents who have seen an especially powerful program on television the night before; parents in tears. They know; they know that what they're doing with their kids isn't right and they don't feel good about it. The television program has motivated them to reach out for help. We have some resources, but we need more.

We have educated school personnel about child abuse. The superintendent of schools, in cooperation with ICAN, has printed guidelines for identifying and reporting child abuse for all school personnel in Los Angeles County.

One of the things we did in this county which I think has been especially beneficial, and it is not unique to this county, was to establish the child abuse hotline. We're so big, we have so many police agencies, our department has so many offices, that people didn't know where to call to get help. We started that line in 1977 and it's been very successful. We're receiving over 1,300 calls a month now. We get calls from people seeking help for themselves and information about where to report child abuse and neglect. All of these child abuse activities have resulted in a tremendous increase in our caseloads. Between 1975 and 1979 we have experienced a 38-percent increase in the number of referrals to our children's protective services. That I think is good. There are families out there that need help, that need early prevention, that need to be identified before a child is severely injured. They're being referred to us for services. What we need are some of the kind of treatment programs, some of the kinds of support services for families that you're going to hear about in the balance of the testimony.

We've just begun, really, to get public acceptance that child abuse is a problem for which people need help and can get help. Now we have to look at the other problems of providing sufficient resources so families can get help.

Mr. CORMAN. Thank you very much. Mr. Hart.

STATEMENT OF DENNIS B. HART, DIRECTOR, ORANGE COUNTY DEPARTMENT OF SOCIAL SERVICES

Mr. HART. Good morning, my name is Dennis Hart and I'm the director of social services for Orange County, and I appreciate the opportunity to be with you this morning. First of all I would like to bring you a note of appreciation from my board of supervisors from Orange County who wanted me to express their thanks for your efforts on behalf of title XX and child welfare programs in the past. We would have liked to have had more success with some of your proposals but nevertheless we feel that H.R. 3434 offers an extremely important opportunity for our clients in the future.

Anyone who is in this business realizes that we're now faced with a veritable shortage of resources. I'm sure that you probably received a lifetime's worth of testimony in the past year on what has happened because of the ceiling on title XX and what inflation has done to the erosion of the service dollar. I won't go into that. We can all talk gloom and doom, and I think one of the things that may impress you during these 2 days is you will find that with this limitation of resources that we are getting a lot of innovative and creative thinking,

both in the public and private sectors. We are finding new ways to consolidate, combine, coordinate; work together to maximize what resources we have available.

I would like to give you some examples of what's happening in Orange County and how they relate to some of the child abuse and the identification efforts we're making.

We do have a child abuse registry. We've had a system for about 5 years in Orange County that is available 24 hours a day. We receive two types of phone calls: One is from the professional, the person mandated by law to report any possibility of suspected child abuse; the second is from the general public. We keep all the records available at a central resource so that when a call is received we are able to assist the social worker when he receives that particular call to make some type of judgment and to take the necessary emergency action. The registry tells USIF we know this family either through the welfare rolls or through a past indication of some type of child abuse. We use this additional information to assist us in formulating some kind of plan of action with the current emergency.

Barbara mentioned one of the things that happens when we agreed to get involved with the public awareness campaign as we started the child abuse registry. The campaign is very essential to the registry but the results overwhelm you. There's a tremendous case finding aspect that takes place.

From 1976 to 1978 we showed a 205-percent increase in the number of cases reported to us. This was the result of going out and meeting with law enforcement, hospitals, doctors, nurses, community groups, and let them know what their responsibility was and to assist them in identifying child abuse as well as working very closely with the schools obviously.

We continue right now to receive on the average of about 300 reports per month in this system and we've learned several things from it.

First of all, about 50 percent of our calls are still relating to children who are 7 years or younger which means these children will not be picked up in the school system, generally speaking, and then again you have to go back to your community training if you're going to have some type of visibility for these children in terms of neighbors and other essential persons identifying the possibility of a child who may be in danger in the current situation.

We also found that we're dealing with a much harder core in family situations; more severe child abuse is taking place than ever before.

Sexual child abuse is on the increase. This, tied with the fact that our emergency shelter care facility showed a 45-percent increase during the past year, tells us another important thing; that is, proposition 13 eliminated many preventative services. For example, in 1978 I lost 25 percent of our social worker staff which forced us to start doing things a little differently. We had to streamline our procedures and reprioritize our services. But it also removed the funding from some community agencies. We used to have a program assigned to our welfare offices where we began to see in the early stage that families were having some difficulties in managing their resources or providing meals for children or properly supervising their children.

We identified problems at a very early point in time. We had other programs where families could work with us on a voluntary basis to resolve the immediate problem.

Those programs were eliminated and what it means to us basically is we're seeing child abuse further along the stage; after the child has already been in the formal system and after they go through the court process. We are working with them after detention because we don't have the funds for preventive services.

We also have something new that I'm sure the State director will be testifying to late tomorrow regarding the emergency response system. The State put 85 million in the pot for counties and counties still match this with their 25 percent share but it has been available for the past fiscal year. However, it has been difficult for the counties to utilize a uniform approach to the 24-hour response system throughout the State.

It has improved services in some areas, but we still have many difficult problems. Quite a few counties have not even implemented the plan even though it's been available throughout the past fiscal year because of so many new regulations and reporting requirements.

In Orange County it has helped us in one area and that is it requires that you go out on a suspected child-abuse case within 2 hours from the time you receive the call. We're meeting that requirement but what's happened is it's taken the majority of our staff's time so we're not available for followup services. We deal with the immediate crisis but we need to follow up to make sure that they've been to family counseling or that the problem is resolved.

It does emphasize the public awareness campaign which is very important. We have agreements with the majority of our law enforcement agencies in which we agree that our efforts are to maintain each child in their own home, wherever possible.

There's a couple of other things that we're doing that may be of interest, and one is the fact that we've had a human services agency in Orange County. We have been able to do some things through teaming; that is, we work side by side with mental health and public health to form a team not only to do a joint assessment of the family problems but to work together to see if we can't bring our resources together to meet the individual case needs. We have a teamwork effort for sexual abuse problem where again you may have the mental health workers with the parents and a social worker there counseling the child and if necessary, a field nurse helping the family and getting necessary medical counseling as well. The team approach holds a lot of promise for the future. We do not believe that social workers can be all things to all people. The idea of using joint resources and I would hope that perhaps in the future on the Federal level you might do some things that would help us insofar as the categorically limited funding sources, ways we could mix that money and not have such stringent controls on them so that, for example, mental health and title XX moneys can be combined. We do have these opportunities with the money we have available today.

The other thing is the private agency coordination. In Orange County there are 11 private agencies right now or in the past year that have given voluntary time to our agency. They realize that we cannot respond to every child and report like we should and therefore they are voluntarily using their counseling time and working with some of our less serious cases—the single parent family, the mother in stress, the parental neglect, nutrition problems. We offer them training.

orientation assistance, and then after substantial training we refer some of the cases to the private agencies and we work side by side without providing any additional funding. It has a potential for the future, one that we are following very closely. I think we have to acknowledge, as I wrap up my statement, that social services is probably not a high national priority. We believe that our programs are essential. Certainly if I had additional funding, my approach today would be to outstation or co-locate social workers at hospitals and with law enforcement and, perhaps the schools—at least on a representative basis so we're there at a point of early contact before that child is taken into custody and brought to us for detention and placement.

We should be there at the point of contact. We should have emergency caretakers, teaching homemakers, respite care resources available for that family at that point in time before the child needs to be removed from the home. I'm convinced that when you have limited staff, limited resources, and limited alternatives, the obvious route is to take the child into custody so no one takes a risk.

And, of course, the system depends upon the social worker's judgment. This gives me the opportunity to plug the title XX training funds. However, I won't be doing that at this particular time.

Again let me sincerely tell you how much we appreciate your efforts on behalf of these programs. We certainly offer our support and anything we can do in the future to assist your efforts——

Mr. CORMAN. Thank you very much. Mr. Rousselot?

Mr. ROUSSELOT. Mr. Chairman; Mr. Hart, did you mention a hotline of some kind?

Mr. HART. Well not only a hotline. We have a registry where we keep all the records in a central office.

Mr. ROUSSELOT. Mrs. Flaherty, you have the same thing?

Mrs. FLAHERTY. We don't have the central register but we have somewhat the equivalent in that if families have been referred to protective services previously we have access to those records.

Mr. ROUSSELOT. I was interested in your comment on the impact of television, which by the way we recognize is in 96 percent of the homes in this country and it's on 6½ hours a day. There is quite a wave of response when there's some kind of broadcast on this subject by parents who confess, "Well, gee, I really need help." Do you have that experience too, Mr. Hart?

Mr. HART. Exactly. For example——

Mr. ROUSSELOT. So television does play a role.

Mr. HART. It's very important. We have an overcrowded condition in our shelter care facility. It went out in a couple of newspapers and TV stations covered it. We had a tremendous response; the most we've ever had as far as foster parents——

Mr. ROUSSELOT. Parents who need to help themselves.

Mr. HART. Well, people willing to donate time and money to assist us with the problem. It's really interesting to hear everybody talk about their resources. People stepped forward in the hundreds and said, "I'd like to be a foster parent." One woman called up and said, "Here's a check. I'll give you a check every month and you use it for whatever needs you see."

Mr. ROUSSELOT. You think we can do that in politics—a check every month? The reason I bring that up—I was fascinated that the parent who needs the help responds to this kind of programing.

Are the stations willing, when they have this kind of program, to notify you so that maybe you can get some time during the program to let people know how to get help locally?

Mrs. FLAHERTY. Yes. They usually will put our child abuse hotline number on and if the station is seen in other counties they make sure the other counties' hotline number is shown too. One station, Public Broadcasting Service, channel 28 had a program on child abuse about a year ago and they invited our staff to come in and man their telephones for people to call in that night so they really have been responsive.

Mr. ROUSSELOT. The programs produced by commercial networks—have they been fairly responsible in their presentation?

Mrs. FLAHERTY. The programs I was talking about were really—say a movie about child abuse——

Mr. ROUSSELOT. A movie?

Mrs. FLAHERTY [continuing]. A movie about child abuse and a very moving kind of situation where the parent watching can identify with some of the problems that——

Mr. ROUSSELOT. Which movies have done that?

Mrs. FLAHERTY. "Mary Jane Harper Cried Last Night," "Raised in Anger"—I'm trying to remember. I can't remember some of those right off. And then there have been specials on child abuse and neglect by the various stations that have gotten various degrees of response. I think the material has to be presented in a way that it is indicated to the parent that there's some help available; that there's some sympathy for the problems and discusses them.

Mr. ROUSSELOT. That's why I wondered if they're willing to give you advance notice so you can put some kind of a spot in there.

Mrs. FLAHERTY. Yes. In fact that was one of the problems before we had our central hotline number in the county. The television stations doing a program on child abuse would come up and say, "Well, where can people get help?"

Mr. ROUSSELOT. I see.

Mrs. FLAHERTY. And we'd say, "Call one of our 25 offices or one of the 48 police departments in the county or one of this long list of community agencies——

Mr. ROUSSELOT. Call your local bar association.

Mrs. FLAHERTY. Yes. "Look in the phone book."

Mr. CORMAN. Let me ask how many calls you get on those hotline centers that are not valid calls. The thought would cross one's mind—a child gets angry with his parent because of some little thing and calls. Is there very much of that?

Mrs. FLAHERTY. I took a call myself with two kids calling in about their friend who had been grounded and they felt it was inappropriate, you know.

Mr. ROUSSELOT. Clearly child abuse.

Mrs. FLAHERTY. But, you know, it's a place where people can call. We do an assessment of the calls and we operate on the assumption that if it sounds like it's legitimate we are going to go out and look at it. All it is is a referral for assessment for us to look at. It doesn't mean

that we are going to go out and take the kids away. It doesn't mean we're going to storm the family.

Mr. ROUSSELOT. Send out all those government workers.

Mr. CORMAN. I take it that it really isn't enough of a problem that it diminishes the effect of the hotline.

Mrs. FLAHERTY. You know, with child sexual abuse, for a long time people believed that girls make up these kinds of stories; that it really wasn't true. We've taken the position with our project that when a child says that he or she is being sexually abused within the family, it takes a lot to say that, that it is happening, and we have not found any situations yet where the child has been lying, though it's not inconceivable, certainly.

But, we have to go in there on the assumption that the child is telling us the truth and then assess it very carefully.

Mr. HART. I think it is a most difficult thing to sort out at this point and with community education I think the calls have been more responsible. There aren't any wasted calls but I think we're also seeing the other end of the system where the 601, the status offender went out the window. We're seeing a lot of calls where it's difficult to sort out the cause of the problem; is it the child's behavior or is it the parents who are causing the problem? You still have to deal with it but I think our area of responsibility has really broadened out as we meet some of the gaps in the system.

Mrs. FLAHERTY. You know, one of the other things we're experiencing quite a lot is the reluctance of people to report. We had a situation not long ago where a nursery school teacher called. She described a situation that was clearly, in my mind, a dangerous situation for the child, and was not willing to report it. She talked to her administrators and they said, "No, don't. It's a nice family." Well, the lady called us back later on to say, "Yes; I should have. The child is in the hospital."

So, you know, when I said we still need education and training I mean that; because people are reluctant to interfere with the family.

Mr. CORMAN. Sexual abuse within the nuclear family—are there very many cases of the natural parents doing that as opposed to stepparents?

Mrs. FLAHERTY. The figures that we have now would lead me to believe that it probably is about maybe 45 percent natural—most of the cases that are reported to us involved a male—the male parent and the female victim.

Mr. ROUSSELOT. That's the majority of the cases.

Mrs. FLAHERTY. Those are the majority of the reported cases and about maybe 45 percent of those would be the natural father and the others would be stepfathers.

Mr. CORMAN. I wonder if we are getting worse in our conduct or just more aware of that kind of thing.

Mr. SWINGER. I sincerely think that we're just becoming aware of something that's been here all the time. I would like to believe that we're reaching a point where we'll get a real good clear picture of exactly what's out there. I don't think this will continue—I believe we're mapping the terrain as it exists.

Mr. CORMAN. Thank you very much.

Mr. ROUSSELOT. Dr. Swinger, where is your facility?

Mr. SWINGER. California State University of Los Angeles.

Mr. ROUSSELOT. On the campus?

Mr. SWINGER. On the campus.

Mr. CORMAN. Thank you all very much. We're very pleased you could participate in our hearing.

[Brief recess taken.]

Mr. CORMAN. Our next panel is Mr. Leonard Lieber, Barbara Adelson and Betty Lansdown. Thank you very much for coming down.

STATEMENT OF LEONARD LIEBER, NATIONAL ADMINISTRATOR, PARENTS ANONYMOUS, INC.

Mr. LIEBER. We're very glad to be here too. What we'd like to do is to relate to some issues that were brought up earlier and that is cost effectiveness and quality control and some creativity on the part of the Federal Government to do more in nurturing families who are in stress.

Mr. CORMAN. I think cost effectiveness is important. I hope you'll be able to give me some value of the reclaimed life in dollars and cents——

Mr. LIEBER. Is there——

Mr. CORMAN [continuing]. It's not a simple thing to do.

Mr. LIEBER. On my right is someone who I believe can directly address that issue personally, Betty Lansdown, a parent in our program and on her left is the California coordinator, Barbara Adelson.

We really appreciate the opportunity to be here. We represent some ideas and feelings on the part of the members in our 1,200 chapters worldwide. Approximately 12,000 to 15,000 families participate directly in Parents Anonymous meetings throughout the United States and abroad at a cost of $40 per family per year.

Parents Anonymous Inc. is a nonprofit, tax-exempt corporation that was originally granted 501–C3 status here in California in 1970.

It began as a service supplement for those families who were not amenable to treatment provided by the established agencies or for those families who could find no treatment anywhere. And, there was not much of it at that time.

We use a modified self-help format which includes active participation of volunteer professionals. Our national program is currently funded by the National Center on Child Abuse and Neglect in Washington and is the largest self-help program in the world receiving public moneys.

In addition to services for parents, Parents Anonymous offers groups for younger children and teenagers throughout the United States. This is part of our primary prevention effort.

We operate the only national watts line for families in stress and on the average receive in excess of 15,000 calls a year from parents who are in dire straits and need references to our program and to other programs which provide services.

My own personal involvement in child abuse began in the 1960's here in southern California. I was a protective services and child welfare worker for Los Angeles County, DPSS. I was also involved at MacLaren Hall as a child welfare supervisor for a year and a half. Later I became a psychiatric social worker for both the California State Department of Mental Hygiene and for Los Angeles County's Harbor General Hospital.

Since 1974 I've been the national administrator and executive director of Parents Anonymous.

We'd like to support some of the issues that you've raised in H.R. 3434 as being very helpful. We also would like to take off from there and look at some things that perhaps may be additionally helpful as you look at future legislation that can protect families in stress.

We're very interested in the citizen review by your committees for participation of service recipients to a very heavy degree.

We're very pleased to see that there is emphasis on helping to keep families together who can benefit from in-home service and we concur in tight economic sanctions to deal with the historically negative experience of children who have spent too many of their lives on the merry-go-round of foster placement.

We'd like to take a look at observations that we've been able to glean from communities in this country, of communities of all sizes; anywhere from 500 people to 5 million people. They are rooted in the belief that quality services do require financial support but that quality cannot necessarily be purchased. They rest on the belief that we are all vulnerable and that we must all be involved in dealing with causes and solutions in very creative and cost effective ways.

Not all of the recommendations that I have here are discussed at this time because I have a bit too much written in the way of formal testimony which I've presented to the committee. You have copies of it already. I'll gloss over some of them and I'll cover most of them.

Mr. CORMAN. We will include your full statement in the record. We'd be pleased if you'd summarize it.

Mr. LIEBER. All right. Thank you.

We are most aware at this time in our Nation's history that people are asking for human services from the public and private sector more than ever before. In fact today, this year, there will be 500,000 parents in stress calling all kinds of hotlines, help lines, WATS lines asking for help. This is voluntary. Ten years ago there were virtually no parents asking for help in this regard.

This year there will be 1¼ million reported incidents of child abuse and neglect; so that's about 1¾ million people—families who needed services and as you know the services that we have available with the money behind it are basically less than we had about 10 years ago because of the shrinking of the dollar and a couple of other items. Because of this you've got to reallocate money. We've got to find new ways of dealing with the problem. We believe it's possible.

No. 1, we propose that every community have attached to its public services agencies a cadre of trained volunteers to work with identified families in stress. This would provide for the freeing of time of salaried professional staff to expand their service potential by reaching out to additional families. We know that there are thousands of individuals in this country who are more than willing to be professional assistants, paraprofessionals, and volunteers working with families of stress. In our program we have many thousands of those persons. We also recommend that case aides be assigned on a salaried or voluntary basis to follow the progress of new mothers, particularly those below the age of 18 years. It is our experience that the small children of such parents receive few, if any, services after their birth and are usually

not seen again by public agencies, such as local school personnel on a regular basis until the children reach at least age 5.

We ask that every part of a community's human services system have volunteers trained to assist teaching staff in developing family life-interpersonal communication skills curriculums in school systems beginning in the elementary school setting.

We believe that every child should have the right for better understanding of himself or herself, effective methods of caring for infants and communication skills for adequate interpersonal behavior. This basically is to help prevent causes of "child" abuse—low self-esteem and an inability to cope with life stresses and basically life situations of all kinds. We're not proposing to teach people how to behave uniformly; rather we believe the children should be provided models of healthy behavior from which to choose.

In our program, Parents Anonymous, we've had parents from our program work with schools across the country on a volunteer basis for the past 10 years helping youngsters to better understand what's in store for them as parents—helping them get in touch with their being children.

We propose that family stress curriculum be developed in all professional schools in the United States. It is our experience that persons graduating from schools of medicine, law, nursing, education, and especially social work have often been poorly trained to identify and effectively treat the causes and symptoms of child abuse and family stress.

We know that it is not necessarily true that a M.S.W. or a Ph. D. will give you the skills you need and, in fact, in most occasions they provide nothing in the way of working with families in stress. We believe that perhaps the most effective tools that can be used are to bring in paraprofessionals and parents who've had negative and positive experiences in family stress. We believe they should be brought into the graduate schools voluntarily, if you will, and provide the kind of training which faculty cannot and will not be able to provide.

We strongly urge that no child ever be sent home from foster care—back to the youngster's original family without that family first participating and successfully completing the therapeutic experience prior to the child's return.

We've had thousands of parents in our program. We know what happens when parents receive kids back when they have not been prepared for it. It is a human tragedy in most situations. It's unfair to everyone.

We believe that agencies involved be held accountable to see that families receive services required to meet their needs. We point to the example of Judge James Delaney, in Adams County, Colo., who has set up a therapeutic dialog of social services, private agencies, including our Parents Anonymous program there and the court so that everyone is responsible for their own area of expertise so the parent is not responsible for looking for services when they don't know how the system works; where again social service staff set the parents up so that they can be prepared to take their children back.

If the child cannot be returned to his or her home we honestly believe that the best thing to do is to find a permanent loving home as soon as it is humanly possible and not spare the horses to do so.

We recommend that no social services or related human services worker be responsible for both the reporting to the court, reportable abusive behavior in a family's home, if that same worker has also been designated to develop a therapeutic confidential relationship with the family in question. What I'm saying is that in most protective and child welfare service systems we ask the social worker and protective services in child welfare to be the person who has to report to the court about what he or she has seen in the family and at the same time they have to tell the parents, "Please confide in me the problems you're having so I can help you." Well, in fact, human nature doesn't work that way. If we believe somebody's going to go back to court and report on us we're going to hold back. This is where the Parents Anonymous program can come in. We're not talking about hiding child abuse but we're talking about giving someone an opportunity to feel comfortable and to be as honest as they possibly can.

Along those lines we believe that some of the responsibilities placed on social services personnel, and I can speak from personal experience, in the past 15 years, have been so serious that many people as you know have "burned out" on the job. They were finding other occupations where they could work with families.

They are bartenders, waiters, waitresses, stockbrokers; anything that they can do to maintain human contact but to get out of some of the human misery they're finding in the protective services system and we are not necessarily blaming the administrative staff in the system. We're talking about a system that has not worked adequately enough.

On this basis we are now setting up our own "burn out marathon" for professionals around the United States at no cost to them so that they can deal with their own feelings and their own areas of growth in a way that can perhaps help them decide who and what they want to be "when they grow up."

We ask that every community have a special advocate for those families, including foster families and children at risk who have received little or no services from agencies. With caseloads of 90, 100, and 120, many times a good foster family gets no attention and after 6 months or a year they wonder where is the visit from the social service staff who was supposed to have been out to see them. This is a very common sort of thing and we ask that ombudspersons be set up in each community. In fact, in places like Kalamazoo and Jacksonville, Fla., there are trained volunteers to be these kinds of ombudspeople. It is very cost effective.

We specifically ask Congress to acknowledge that military families are in themselves families in a constant state of flux. They are transient families. As you know, they are not receiving adequate economic supports, they are away from roots; they are in fact, from my own personal observation, literally living under the shadow of nuclear warhead equipped aircraft in Germany. I've visited some bases there where we have our European office and we've also talked with people who have just spent 4 months on a nuclear submarine, totally submerged and are expected when they are off the boat to come home and be good parents. That is totally impossible and for that reason we are expanding our service so that many thousands of military families have access to a program such as ours and others.

Finally we ask that legislation be specifically developed to supp
the work of alternate family groups which provide nurturing outs
the normal family group structure.

Within the United States there are several hundred self-help
ganizations that have been doing a great deal of work on behalf
families in stress. We continue to encourage the use of public mone
to develop permanency of local and State organizations of the Pare
Anonymous program which now serves several thousand families
the United States, and another 30,000 families who are in touch ov
the phone. We have about 40 State-funded offices from public mone

Self-help organizations regardless of their funding status can pr
vide cost-effectiveness equaled by no other service organization. F
example, for every $1 of public money we receive by the Nation
State, and local organizations of Parents Anonymous, it is estimate
that some $10 in volunteer time is received for ongoing treatment
parents and children at risk. We've estimated that families in t
P.A. program are served by public tax dollars at approximately $
per year per family. We compare this to as much as $15,000 per ye
per child who, after it has become too late, must live in a long-ter
residential setting.

The above recommendations are just some of the things which w
recall from talking to our people all over the country. We will neve
have the buying power to purchase services for everyone but we ca
all identify ourselves as members of one large family looking to thos
avenues which provide quality nurturing at a very minimal financia
cost. Perhaps we can develop a greater closeness of feeling and sens
of responsibility to do more for each other as a means of self-insurin
a higher quality of life for all of us.

I presented to you a copy of "Hope for the Children—A Personal
History of Parents Anonymous." It is a book chronicling the first 1
years of our program, published at no expense to the public, by Wins
ton Press of Minneapolis.

We also have provided some copies of our newsletter, reaching about
40,000 persons throughout the country; some of our other materials
which are designed for parents' professional consumption.

And at this point I'd like to turn it over to our California State
Coordinator, Barbara Adelson.

Mr. CORMAN. Thank you.

[The prepared statement follows:]

STATEMENT OF PARENTS ANONYMOUS, INC.

We appreciate the opportunity to present testimony on H.R. 3434. Our comments reflect ideas and feelings of the many thousands of consumers and service providers in our program which numbers over 1200 chapters worldwide.

Parents Anonymous, Inc. is a non-profit, tax exempt charitable corporation originally granted 501–C3 status as an educational organization, by the Internal Revenue Service.

P.A., as it is popularly known, began as a service supplement, in 1970, to families whose child abuse problems were not amenable to treatment by other services available (or non-available) at that time.

The program utilizes a modified self-help format which includes active participation by volunteer professionals. Our national program is currently funded by the National Center on Child Abuse and Neglect in Washington, D.C. and is the largest self-help program in the world receiving public monies.

In addition to services for parents, P.A. offers groups for younger children and teenagers in many communities.

My own personal background in child abuse identification, prevention and treatment began in the mid-1960's in Los Angeles County. I was a protective services and child welfare worker and supervisor for L.A. County's Department of Public Social Services. Part of my time was involved at MacLaren Hall in 1967 and 1968. From 1968 to 1972 I was a psychiatric social worker for both the California State Department of Mental Hygiene and Los Angeles County Harbor-UCLA Medical Center Out-patient Psychiatric Clinic. From 1974, at which time federal funding began for the establishment of a national Parents Anonymous program, through the Department of Health, Education and Welfare, I have served as National Administrator and Executive Director of the Parents Anonymous national office.

In reviewing a number of the provisions which are part of H.R. 3434 to update, humanize and make more effective child abuse and foster care services in this country, we wish to lend our support to a number of recommendations which have already been made.

Very importantly are the developments of citizen review and advisory committees with heavy participation of service recipients who will, with a great deal of responsibility, provide advice and consent in the area of agency provision of services to abused families as well as be involved with the establishment of standards of professional behavior on the part of mandated agencies providing such services.

We are also pleased to see the emphasis on helping to keep families together who can benefit from in-home service and we concur in tightened economic sanctions to deal with the historically negative experience of children who have spent too many of their formative years on the merry-go-round of multiple foster home placements or extended periods of time in foster care without the provision for a permanent family home, whether it be with their own biological families or other concerned child care givers.

At this time, we should like to offer some additional food for thought with accompanying recommendations for economically sound provisions in the area of child abuse treatment and prevention which could actually strengthen provisions of H.R. 3434. The ideas that follow come from our observations after working throughout the United States in communities of all sizes. They are rooted in the belief that quality services do require financial support, but that quality can not necessarily be purchased. They rest on the belief that we are all vulnerable and that we must all be involved in dealing with causes and solutions in creative ways.

We are most aware at this time in our nation's history, people are asking for human services from the public and private sector more than ever before, while at the same time services are shrinking, in great part, because of the lower purchasing power of the American dollar and because of the growing non-availability of same for human services. With the re-allocation of funds, answers must be found. We believe that this is possible.

With this in mind, the following recommendations are suggested:

(1) It is proposed that every community have attached to its public services agencies, a cadre of trained volunteers to work with identified families in stress. This would provide for the freeing of time of salaried professional staff to expand their service potential by reaching out to additional families. It is our belief that thousands of persons throughout the United States are eager and willing to become involved as part-time volunteers on behalf of families who are in need of their nurturing. It is also pointed out that demonstration projects are currently under way in various communities across the country which are looking at the effect of trained lay persons to serve as ombudspeople for youngsters who may be in jeopardy of becoming lost in the protective services-foster placement system.

(2) We ask that case aides be assigned on a salaried or voluntary basis to follow the progress of new mothers, particularly those below the age of 18 years. It is our experience that the small children of such parents receive few, if any, services after their birth and are usually not seen again by public agencies, such as local school personnel, on a regular basis until they reach the age of four or five years. We believe that such a recommendation would go a long way to prevent a great deal of stress for parents and children of such families in the extremely high cost for all of us later in that child's life.

(3) We ask that as part of every community's human services system, volunteers be trained to assist teaching staff in developing family life-interpersonal communication skills curricula in school systems beginning in the elementary school setting. We believe that every child should have the right to better under-

standing of him or herself, effective methods of caring for infants and communication skills for adequate interpersonal behavior. We do not propose to teach people how to behave uniformly. Rather, we believe that children should be provided models of healthy behavior from which to choose. We believe that volunteers coming into the school setting can provide information from their own experiences in regards to pros and cons of life styles, particularly in the area of parenting.

(4) It is proposed that family stress curriculum be developed in all professional schools in the United States. It is our experience that persons graduating from schools of medicine, law, nursing, education and especially social work have often been poorly trained to identify and effectively treat the causes and symptoms of child abuse and family stress. We can ill afford to continue working with people on a piecemeal basis when, in fact, a more holistic attitude toward nurturing all families must be taught to those persons who come in contact with families at various stages of need. Along those same lines, it is common knowledge that most social service providers in the protective services field do not have a graduate degree. For this reason, we strongly suggest that special training be provided for these persons, not necessarily by a highly paid training staff. Rather, this can be done by para-professional consultants and, in the case of our organization, parents who have improved their skills to the point where they are no longer in the midst of family violence problems.

(5) We encourage all communities to develop "block families" and coop family centers to whom parents and children within the neighborhood can turn for help in time of crisis. It has been and remains unwise to believe that publicly mandated and financed services or private agency efforts can meet the needs of all families who are in need of extra nurturing and crisis counseling. The use of block families and coop staffed centers could alleviate the pressures on established agencies to provide assistance but they would also provide communities and neighborhoods with a greater sense of cohesiveness and caring than has been noted during the past several decades.

(6) We encourage the use of retirees to serve as family aides for those families in stress or identified as at risk family groups. These positions may be voluntary or paid, possibly depending upon the economic need of the retiree who is capable and willing to be so involved. This would again stretch the capability of established human services agencies and certainly promote the status of senior citizens, something which has fallen on hard times of late.

(7) We strongly urge that no child ever be sent home from foster care back to the youngster's original family without that family first participating in a successfully completed therapeutic experience prior to the child's return. It has been our experience that too many youngsters throughout the past many decades have been first removed from an abusive situation at home only to return to the same home months or years later and receive care grossly inadequate for their needs. We believe that agencies involved be held accountable to see that families receive services requird to met their neds. We point to the example of Judge James Delaney in Adams County, Colorado who has developed a therapeutic system in his jurisdiction involving local social services agencies, Parents Anonymous, family counseling programs and the like. If, in fact, a child may not be returned to his or her home, we urge that a permanent home for that child be found as soon as it is humanly possible.

(8) It is recommended that no social services or related human services worker be responsible for both reporting to the court, reportable abusive behavior in a family's home if that same worker has also been designated to develop a "therapeutic, confidential" relationship with the family in question. It is certainly, at best, contradictory that a social services agency worker be told to ask a service recipient to trust him or her and at the same time inform that recipient-consumer that whatever is said may be placed in a court record and used against that parent.

We suggest that the role of investigative and reporting worker be confined to one individual in an agency and the role of "therapeutic intervenor" be assigned to another individual. The current system is, at best, illogical, impractical and has certainly contributed to the rate of "burn-out" that thousands of social services personnel have experienced in this country during the past 15 years of protective services program development.

Along those lines, we have just begun our own effort to work with a limited number of human services professionals across the country by establishing "burn-out marathons", settings in which protective services, mental health and other

similar agency staff may be able to find support and nurturing in brief therapeutic settings away from their own work places. Very little has been done on a national scale to provide for the well being of the thousands of human service practitioners who have, themselves, been caught up in an emotoinally abusive situation which our protective services systems have become over the past decade and a half. In my personal observation, we have asked a great deal from a small group of people and have given them very little in the way of skills before they hit the streets and next to nothing in the way of support to keep them from burning out on the job.

(9) We ask that every community have a special advocate for those families, including foster families, and children at risk who have received little or no services from agencies which are mandated to provide them. As mentioned before some pilot projects are beginning to protect certain youngsters who may be victims of a system. We strongly suggest that special ombudspersons be highly identified to such families who, for example, receive assurances of regular visits from social services staff but, for whatever the reasons, receive no word from any designated authorities for six months to a year after court intervention or similar circumstances on behalf of a family at risk. Again, we believe that volunteers from the private sector can be recruited to provide a great deal of assistance at a tremendously small cost to the taxpayers.

(10) We specifically ask Congress to acknowledge that military families are, in themselves, transient/foster families in a constant state of flux. They are, by their existence, families at risk. We as a nation have provided human supports for our families in uniform at a woefully low level. We ask that a very small percentage of defense appropriations be earmarked for increased family stress services to all military families, particularly those with pre-school children.

From my own personal observation, I find it totally unacceptable to expect someone after serving for four months in a continuously submerged nuclear submarine to come home and step right back into a healthy domestic role. Nor do I find it easy for a family to be stationed with the U.S. military in Europe living literally under the shadow of nuclear warhead equipped aricraft and/or with the armed forces of a hostile government just a few short miles away.

With the cooperation of the National Center on Child Abuse and Neglect, our Parents Anonymous program has recently established a unit for U.S. military families in Europe so that Parents Anonymous groups for parents and, hopefully, their younsters can be made available to foreign based U.S. citizens living in Europe and the Middle East.

(11) Finally, we ask that legislation be specifically developed to support the work of alternate family groups which provide nurturing outside the normal family group structure. Within the United States there are several hundred self-help organizations including our own which provide nurturing for individuals and families who can find such nowhere else.

We encourage the use of public monies to develop permanency of local and state organizations of the Parents Anonymous program, which now serves over 12,000 families in the United States. Self-help organizations, regardless of their funding status, provide cost-effectiveness equalled by no other service organization. For example, for every one dollar of public monies received by the national, state and local organizations of Parents Anonymous, it is estimated that some ten dollars in volunteer time is received for ongoing treatment of parents and children at risk. We have estimated that families in the P.A. program are served by public tax dollar at approximately $40 per year per faimly. We compare this to as much as $15,000 per year per child who, after it has become too late, must live in a long term residential setting.

The above recommendations and comments are but a sample of the thinking which we believe must be followed to deal with the adequate nurturing of families in our nation who are active or potential service recipients of social service agency child abuse units. As mentioned earlier, we shall never have the buying power to purchase services for everyone. However, if we can all identify ourselves as members of one large family, looking to those avenues which provide quality nurturing at a very minimal financial cost, perhaps we can develop a greater closeness of feeling and sense of responsibility to do more for each other as a means of self insuring a higher quality of life for ourselves.

We again express our appreciation to be included in the hearing proceedings. As a supplement to this testimony we are providing you with a copy of the ten-year chronicling of our program, "Hope for the Children-A Personal History of Parents Anonymous," by Patte Wheat.

Thank you.

Mr. CORMAN. Thank you.
Miss Adelson.

STATEMENT OF BARBARA ADELSON, STATE COORDINATOR, PARENTS ANONYMOUS OF CALIFORNIA

Miss ADELSON. Thank you. I want to thank you for having us here today and I'm especially pleased to meet you since I'm a valley resident and I just would like to direct some of my comments to what Leonard has already spoken or addressed.

I began as the State coordinator for Parents Anonymous in December of 1979. I am happy to say that we have an office that is housed with the Los Angeles Children's Bureau and we are working on very very low funds and trying to do a very very good job of taking care of people in need in California and I think that if I don't make any other point today, the one point that I do want to make is that we are talking about children. We are talking about parenting. We are talking about people. We are talking about our society and it touches all of us.

We have about 72 chapters in the State of California which have been ongoing probably since the beginning of P.A., at various stages of development, throughout the last 10 years.

Since the office was established at the end of December, with a telephone number that is not in the phone book, we receive several phone calls per day by parents calling and asking what constitutes abusive behavior and abusive parents. Where can I go—how can I be helped—I do not want to lose my child.

I think that that is really a mind boggler. You just have to consider these are people that have called and asked information and I think it speaks very much to the needs within our society.

I would like to talk about just a little of the needs of the families and the agencies and what the agencies are able to provide. I think that we are very neglectful of the people out there, our social workers, doctors, because the needs of families are so great, parents who are feeling at a loss, parents who don't know where to turn, who to see. They don't have any families to turn to and feel that they can't share with one another; that they're not living up to being a good parent. We all know what a good parent is supposed to be but very few of us can go through our lives saying I was a good parent all the time. We know we haven't been. I think that Parents Anonymous is an important adjunct to the services, giving a support system, giving a respite, so to speak, to those families, some place where they can go and not feel alone in their trials in raising children.

And, that's really all I would like to say at this point.

Mr. CORMAN. Thank you very much.

STATEMENT OF BETTY LANSDOWN, PARENT, PARENTS ANONYMOUS, INC.

Mrs. LANDSDOWN. Thank you. I am glad to be here. I'm quite nervous about it but I'm happy to be here because I feel that I have a couple of things that I could share with you, not speaking only for myself but speaking for all the other parents who have been in need and speaking for those parents who will yet become in need of services

I'd like to point out first a couple of things that happened to me in my life and I would like to express my feelings of what it is we still need.

In brief, my bringing up was one of emotional degradation by both of my parents and sexual abuse by my natural father. I knew of no available service or services that could help my parents nor that could help me in my situation.

Due to several other things that were happening in my home at that time, I grew up with a very poor self-image, feeling guilty about many things. In fact, I felt like I could take all the guilt of the entire family on and I deserved every bit of it.

You may not recognize me by my name but I think you will probably recognize me by my case history. I was involved in abandonment of my 5-year-old daughter alongside the freeway in Bakersfield in 1969.

Before that I had lost a son, 5 years old, through abusive punishment by a man whom I had chosen at that time to be my partner.

I feel that if, at one time or another, during the course of my life of bearing children—and I've had seven—if someone would have reached out to me and said, "Well, we do have the services that can be helpful to you," I would not have in turn abused my children. My children would not have in turn suffered some of the things that they have suffered. It has been a 10-year separation for myself and my three oldest children; I have 1 year ago last month been reunited with my three oldest children which I'm very happy about. There have been some problems becoming reacquainted with them; they learning who I am and why I am, and I learning who they are and what they are, and dealing with one another on an individual basis. We have had absolutely no assistance from other agencies with the things that we had to deal with.

I recognized one problem—well, several problems with one of my daughters and I knew that she needed a lot of help. After the children were placed with me, a social worker hasn't contacted us since. I took it upon myself to speak to my daughter and ask her if she'd be willing to go to thereapy; I was willing too. She agreed and this is the state where we're at now. We are attempting to gain very close communication with one another.

If it had not been for my being involved with Parents Anonymous while I was in the institution I probably wouldn't have recognized some of the high risks that my daughter and I were under.

I think now that I've been involved with Parents Anonymous for the length of time that I have I realize that I really did not have to be incarcerated for 3 years. In fact it was very costly. I recognize the fact that you persons are very aware that being a person in prison costs everyone a lot of bucks. If I would have been sent to some type of therapy, Parents Anonymous or whatever health service, I feel that I could have gotten myself together with the right support to be able to be gainfully employed and support my children in a very good way.

My children were on welfare from what they've told me. I hadn't had any contact with them for 10 years and now that they're with me they've told me that most of their lives they've been on State assistance. My other two remaining children are somewhere but I have no idea where. I feel that reuniting of children with their natural

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parents should be done as quickly as possible. Families cannot be families if they're not together. With a child being in a foster home and the parent being in their home it's not a real setting for either party.

I feel that outreach to potential high-risk abusive parents is very important. There were several times through my life that this outreach could have taken place for me and I would have been responsive to it. I was crying out for help in several different ways but somehow I wasn't heard.

I feel that it should be mandatory for those persons who have been abusing children and have been found out—I feel that it should be mandatory that when a child is put into a foster placement the parents must go to counseling before the children should be placed back into their home. Along with that I feel that children—because they've suffered and they have a lot of feelings that they need to deal with—also should have some kind of therapeutic backing behind them. Once the children are placed back into the home I feel that it is essential for there to be indepth followup for the parents and the children.

I think that training education for staff members of hospitals, social workers, et cetera is very important. I think that the education entitles them to something unique and that is to become—to be in touch with what the parents and the child are actually feeling when they are separated and when they are together again; if they're fortunate enough, as I was, to be reunited with one another.

I want to thank you and I hope that I've given you some things to think about.

Mr. CORMAN. Mrs. Lansdown we have certainly appreciated your words for us today.

Let me ask you—you say you served some period of time in confinement?

Mrs. LANSDOWN. Yes; I did. I served 3 years.

Mr. CORMAN. Three years. And your case was child neglect?

Mrs. LANSDOWN. No. My case was abandonment.

Mr. CORMAN. In other words your case involved your failure to care for your children.

Mrs. LANSDOWN. That's correct.

Mr. CORMAN. I'd like to ask, during that 3 years that you were in prison, what if anything was done to rehabilitate you so that you would be able to take care of your children when you got out?

Mrs. LANSDOWN. I kind of smile at that because when I was convicted I was really glad that I was going to prison because I knew that I needed help. I had been told by the judge who sentenced me, "You're going to prison not only to serve your time but for rehabilitation." I didn't know what the word meant and when I got into the prison I had asked for help over and over and over again and I was told by staff members and my peers the only way you're going to get help in there is to ask for it; so I begged for it and the help was still not available. There were not enough persons who were professionals to be able to help me and I had asked to get psychiatric help and I couldn't get any in these because I had made a statement that I knew I needed help and my counselor told me that if I knew I needed help, and was willing to ask for it, then I didn't need it.

Mr. CORMAN. What facility were you in?

Mrs. LANSDOWN. I was in C.I.W., the California Institution for Women.

And fortunate for me, because I could not get the help that I needed in that setting, a group of Parents Anonymous—Parents and Mothers Anonymous, it was only for women—I did start it. I was invited to the group and I began to get myself together at that time, going to weekly meetings each week.

Mr. CORMAN. When you went to prison—you at that time had seven children?

Mrs. LANSDOWN. That's correct.

Mr. CORMAN. What were their ages?

Mrs. LANSDOWN. Actually, I had six because the one son I had had died.

Mr. CORMAN. What ages were the children?

Mrs. LANSDOWN. They ranged—I was expecting one also and the oldest one at that time was almost 8.

Mr. CORMAN. Was there any sort of court action taking custody of the children later on or anything said or done at the time of your sentencing as to what was happening to the children?

Mrs. LANSDOWN. Yes. In the—it was in the juvenile hearing. My three oldest children were placed with their natural father after having been in foster homes for a period of time, probably a year, and my next two youngest children were placed also in foster homes; and my youngest child, soon after I went to the institution, was adopted out even without my signature.

Mr. CORMAN. And when you finished your term there was no one to tell you where your children were?

Mrs. LANSDOWN. No. I was hunting for them for a long time.

Mr. CORMAN. John?

Mr. ROUSSELOT. Well, Mr. Chairman, I had to take care of some problems in Washington so I was unable to be here for the entire testimony.

Mrs. Lansdown, I understand you have told a very moving story and I am sorry I didn't hear it all. I have been informed about it. I appreciate your willingness, as a parent who has gone through many phases of this problem, to be here and try to help us better understand what we can do to set the law straight.

I didn't hear your comments about H.R. 3434, whether you commented on that bill at all or whether we've done the right thing or the wrong thing.

Mr. CORMAN. I think she painted a picture for us that we need H.R. 3434—a lot of people need H.R. 3434 and I would say that once caught up in judicial system I was surprised that there was no help—so little done.

Mr. LIEBER. I just wanted to mention that when this happened to Betty—I met Betty when she came into the prison group. I was one of the cosponsors at the time. The judiciary in this country at that time was not as well informed as they are today. There was a long time ago and over the past 8 years many people have been starting to serve on the bench who are much more aware of the needs of the families, much more well versed in the area of the needs of youngsters.

Mr. CORMAN. What resources are available to people who are confined and then released, sometimes less able to cope with their situation than before?

How old were you when your first child was born, Mrs. Lansdown?

Mrs. LANSDOWN. I was thinking—it was a long time ago. I had just turned 18.

Mr. CORMAN. The reason I thought I would mention that is that we're at a time when young people keep getting help for young mothers.

Mr. ROUSSELOT. Thank you all for being here to help us have a better understanding of the parent's point of view.

Mr. CORMAN. We're a long way from the frontlines in this, in Washington, and it's testimony such as yours that makes us realize the importance of it. Thank you.

Mr. ROUSSELOT. Panel, thank you.

Mr. CORMAN. Our final panel for today is Tom Kubasak——

Mr. ROUSSELOT. Pardon me. Mr. Chairman. What's the button say?

Mr. LIEBER. We'd like to leave you with a couple of them. It says, "Come home to the family you've never had. Join Parents Anonymous."

Mr. ROUSSELOT. Oh. fine. Thank you.

Mr. LIEBER. Thank you.

Mr. CORMAN. Our final panel is Tom Kubasak, assistant director for Maryvale, Rosemead, Calif.; Hans Cohn, executive director, Rosemary Cottage, Pasadena, and John Meier, director of Research, Development, Training, and Clinical Division of Children's Village, and an old friend of mine.

STATEMENT OF TOM KUBASAK, ASSISTANT DIRECTOR, MARYVALE, ROSEMEAD, CALIF.

Mr. KUBASAK. Congressman Corman and Congressman Rousselot, I'm Tom Kubasak from Maryvale which was the first child care agency that was set up in Los Angeles back in 1856. It's been in business a while and has been cognizant of the problems facing the community for quite some time. At that time the problem we were facing was the orphan problem, something that in the last 15 to 20 years has been addressed much more in the community that we have talked about here with child abuse. The problem has been dealt with primarily in the area of the adoption system so we don't see a need right now for the orphanage as it was in the past; and yet we're dealing with children that have come from families with problems.

We are a multiservice agency and we provide a day care program—a day care center which has been in operation a relatively short period of time—about 10 or 11 years—and has met the need of the single working parent. We like to think that it has a very large preventive function; that it helps keep these families intact, whether it would be a single parent family remaining united with the child or whether both parents are still together and they both need to work. They have a place for the child to go and get some services.

In addition to the day care service provided, we also provide some counseling for the parents of the children and hopefully this will keep the families intact so that these children will not grow up needing the foster care system.

The residential center which we provide serves children from 3 to 18. We serve boys 3 to 8. We initiated that about 10 years ago to keep

brothers and sisters together so that if a girl came to Maryvale her brother would not have to go to another setting; we felt this would be destructive to the siblings at that point. The amount of abuse that we're seeing—most of our clients are adolescent girls—the amount of sexual abuse particularly, has been very, very apparent in the cases that we know of. Recently we did a study and about 25 percent of the kids came in with a known history of sexual abuse.

Now, this is not to say that there aren't a lot more of these children that are unknown; that are coming into the system so there definitely is a problem and it is something again that whether this is a question of more abuse happening or more reporting of this, that remains to be seen.

In providing the therapeutic milieu, which is something we really try to do for the children, we first do a very careful screening process. One of the first things we try to do is help parents that come to us with the first thing on their mind to get the child out of the home and to be able to sit back. With them we need to say, "Wait just a minute. Let's talk about the problem and let's talk about the alternatives." Sometimes the best service that we can do as a residential center is to point out to them the alternatives that might exist such as family counseling, or outpatient services for the child and the parents, so they can avoid getting into a split of the family unit.

However, when we get into the type of child that is coming into placement now, we are finding more and more of these children with a low self-esteem, which has been mentioned a number of times by witnesses this morning as one of the roots of child abuse.

For some of these kids it's like a funeral going on inside them. They really think of themselves as nothing, as no one, as hateful. They've heard all their life that they're bad, they're stupid, they're no good. A lot of the families have problems and they are laid right to rest on this girl's doorstep. She is now the problem. "If we get her out of the home, it will help." Many of the children who are coming to our facility now have bounced around from foster home to foster home to foster home and finally someone says, well, they're not going to make it in the home anymore, a small home. Maybe they need the distance that a larger facility can provide.

The form of abuse that's sometimes more difficult to reach is psychological abuse and it does take time. If we're talking about a service system, the single most important area we need to look at is providing a spectrum of services. I think it's fashionable in the child-caring business to have different approaches that people espouse as the answer. "If we do this, it will take care of the problem." I tend to be optimistic about the outlook of helping kids and families but I think no one answer is the answer. We need a spectrum. We need the different places to help kids like the ones that need Maryvale, where they can begin to discover they are someone likable, someone that's worth loving, someone that can be cared about. This is a startling discovery for some of the children.

You need everything down to the individual foster home placement. The children have so many different needs and we have to provide a large variety of services to meet those needs.

The cost of a reclaimed life that Congressman Corman mentioned earlier is something that really hit me very strongly because as we

talk about cost efficiency we need to talk about care efficiency. Having the opportunity to work with an agency that's been in business almost 125 years, I can look back and see that there have been about 12,000 children that have been helped just by our agency.

We can look back with this perspective of history and see that those people now have children, grandchildren, great-grandchildren—perhaps even great-great-grandchildren—and that their lives are better from the help and the concern that was given to them many years ago.

So I appreciate the work and the efforts that you've made on behalf of children. Here and now, in 1980, we're talking about H.R. 3434. Right now we may not see as clearly as we may be able to see years from now how much impact it will have, not only on these kids that we are talking about now, but on their children and their grandchildren and their great-grandchildren. So, I thank you for your efforts and I thank you for the opportunity to be here with you this morning.

Mr. CORMAN. Thank you. Who's next?

Mr. ROUSSELOT. Mr. Cohn.

STATEMENT OF HANS COHN, EXECUTIVE DIRECTOR, ROSEMARY COTTAGE, PASADENA, CALIF.

Mr. COHN. Mr. Corman, Mr. Rousselot, I'm Hans Cohn. I testified before this committee last year on behalf of Child Welfare League of America.

It's very gratifying to know that members of this committee have developed legislation which when implemented should serve the cast-off child quite well. The efforts of the conference committee particularly showed the concern for well-planned and adequate welfare services.

On behalf of the children and the families we serve we would hope that the efforts by the members of the committee can continue to strengthen the services to help children.

In my previous testimony I was asked to address a very wide range of policy issues and I don't want to repeat that 43 pages' worth of testimony at this point because it's redundant.

Today, I'd like to focus more on the implications of H.R. 3434 for relatively small agency-providing services to the community.

In this case, Rosemary Cottage is a small voluntary agency which provides out-of-home care treatment for seriously disturbed adolescent girls and their parents. The agency operates four different group homes scattered in Pasadena and South Pasadena. The total capacity is 34 beds. Last year we served close to 300 different girls in residential programs. A large number of these were in emergency care and runaways.

Most of our funding—two-thirds is through the purchasing of service agreements passthrough money from the Federal Government to the State, to the agency.

The remainder is United Way and other voluntary fundings; and our buildings and capital improvements have been bought with and essentially maintained and run by funds raised by volunteer board.

Mr. CORMAN. The ways that you have to account for the money with regard to public funds, is very much of your money spent just in the getting of it and the keeping track of it?

Mr. COHN. Congressman Corman, you're getting into an awfully touchy area because I finished an audit last week. We're subject to our own C.P.A. auditors and our board pays for it. In addition we just had two county auditors in the agency for 3 weeks. We have a budget of approximately $600,000 for which maybe $450,000 is county money. They didn't find any exceptions. But this year there is a new twist. They chose to walk around the grounds with me to make sure that the numbers on water and electric meters matched the numbers on the bills.

Now you know—Yes; we do way too much accounting in too many different ways.

Mr. CORMAN. I know. I won't ask you to interrupt your testimony but I would appreciate it if you would send me how much it costs you to monitor—how much you pay so we can get some better perspective of what percentage of the money is spent in that way.

Mr. COHN. It's probably too much but I don't know how to be cost effective.

Mr. CORMAN. I don't want you to spend too much money answering my question.

[The following was submitted for the record:]

ROSEMARY COTTAGE,
Pasadena, Calif., April 14, 1980.

Hon. JOHN H. ROUSSELOT,
Rayburn House Office Building,
Washington, D.C.

DEAR CONGRESSMAN ROUSSELOT: In keeping with the committee's request that I display our various ways of accounting for our services and costs, I am submitting the attached outline as well as samples of documents—currently in use. Forms used for tracking individual cases are not included.

Sincerely,

HANS M. COHN, ACSW,
Executive Director.

COSTING ACCOUNTABILITY

In this relatively small voluntary agency, the accountability functions, both fiscal and program, are handled as shown below. I would estimate (after attaching very rough dollar values to each activity listed) that 8–10 percent of our expenditures are involved.

I. Staff accountability to the Board of Directors (community volunteers): Monthly financial reports; monthly program statistics.

II. Agency (corporate board) accountability to United Way and community: Annual program and budget review; quarterly financial reports; annual CPA audit; expansion and/or program changes require social need and desirability studies by community volunteers.

III. Corporate fiscal accountability to:

A. Internal Revenue Service, annual filing 990.
B. State Registrar of Charitable Trusts, annual filing.
C. Franchise Tax Board, annual filing.
D. City Social Service Commission/annual filing.

IV. Fiscal accountability to State Department of Education: School lunch program; surplus food program; quarterly reports.

V. Fiscal accountability—Los Angeles County (validation of purchase of service agreement): Annual expenditure experience statement; annual welfare exemption statement.

FIELD AUDITS

1. CPA firm retained by agency board.
2. Annual Los Angeles County--2 staff, 3 weeks.
3. State Deparetment of Education.
4. Periodic—Internal Revenue Service (once in past ten years).

PROGRAM REVIEWS

I. United Way/Los Angeles Program Description. Annual review by volunteer panel.
II. Los Angeles County-Program Description, Annual.
III. State Department of Social Services, annual licensing review (unannounced field visits).
IV. CWLA/Council on Accreditation: Consultation; accreditation study (on-site).
V. CRC: Peer review, bi-annual (on-site).
In addition to these, we are subject to OHSH, fire, health, zoning inspections as in any other enterprise.

CASE REVIEWS

1. Quarterly written reviews on each child in care submitted to responsible public agency (Los Angeles County—Department of Public Social Services, Probation Department, Adoptions Department).
2. Daily behavior logs and attendance registers, medical logs/drugs, etc.

ANNUAL SURVEYS—FISCAL & PROGRAM DATA

Local: Los Angeles County Department of Mental Health.
State: Department of Social Services; Office of Criminal Justice Planning; State Department of Education; Office of Statewide Health Planning.
Federal: National Institute of Mental Health; Law Enforcement Assistance Administration; HEW—Survey of Program on Child Abuse.
In developing this outline and attempting to judge where I find the strictest and most effective vehicles for assuring appropriate service delivery, I would have to point to the value of the Volunteer Board of Directors and the Peer Review/Accreditation processes. The judgments in those areas relate to "stewardship"—i.e., they relate clearly to service quality and costs.

MARYVALE,
Rosemead, Calif., April 18, 1980.

Hon. JOHN H. ROUSSELOT,
Rayburn House Office Building,
Washington, D.C.

DEAR MR. ROUSSELOT: Thank you for your efforts on behalf of H.R. 3434, and thank you for the opportunity to share a little bit about Maryvale with you at the hearing of April 7, 1980. Children's needs are so great and so varied, and it was heartening to hear such a wide variety of service providers testify at the hearing.

Following our panel's testimony you asked us to give you an idea of how much reporting we must do to the various government agencies we are responsible to. In the program area we are reviewed: (1) annually by the State Department of Social Services; (2) twice a year by the Health Department; quarterly by the Los Angeles Department of Social Services and the Probation Department; and annually by the fire marshal.

Fiscally, Maryvale must make the appropriate annual filings to the IRS, State of California and Los Angeles Social Service Commission; annual report to Los Angeles County regarding expenditures for the just-completed fiscal year; annual audit of this report by the County Auditor-Controller Office (this takes several weeks on site plus whatever report-writing time the County auditors must use—all this after Maryvale already has paid for an independent audit by Arthur Anderson & Co.); reports to the State Department of Education regarding our participation in the School Lunch Program and Surplus Commodities Program.

All of the above program and fiscal reports are in addition to the various monthly and quarterly reports sent to Board members, United Way, Social Security and federal and state payroll tax agencies. Maryvale has long been on record

in favor of full disclosure and accountability, but the amount of diversity in reporting requirements (usually with different fiscal year periods) is staggering.

I hope this gives you a feeling for how much reporting and accountability is entailed in operating a program for children. During this "Year of the Family" there will be a lot of well-intentioned rhetoric about the family. But your actions and those of your colleagues on behalf of children and parents speak much louder than words.

As I mentioned to you after the hearing I'd be happy to show you around Maryvale and get a glimpse of what we're offering the people of Southern California.

Thank you again for your commitment to children and parents.

Sincerely,

TOM KUBASAK,
Assistant Director.

Mr. COHN. I got you. Girls in our care are almost always from disrupted families and by that I mean better than 95 percent come in at a point where they're not with their natural parents.

Between 20 and 30 percent of the youngsters we have worked with have been adopted and the adoptions have gone sour and the majority of our youngsters have had several previous foster placements. There also is a pretty high percentage of these youngsters where there have been some incidence of incest. It's a fairly high percentage. Probably 30 or 40 at different times have reported incidents of incest. This is farily typical of the adolescent girls in our settings.

We have a severely troubled caseload. We find that we provide very intensive services—operating within a community setting, using public schools. We're able to work with the youngsters and create some semblance of functioning within a school year's period of time.

We see H.R. 3434 as a very major step in eventually reducing our caseloads, putting us out of business or at least refining our clientele because we see an awful lot of youngsters whom we get in their teens who are the products of second and third generation of families that were abused—consistent patterns.

Our job is to break that chain and restore that child somehow to appropriate functioning. The cost of that kind of services is much more expensive than the costs of outpatient services. It is easier and less costly to provide help for that youngster when he is younger and when the parents are much less angry at them.

We have received the youngster when the parents have had so much difficulty with them that they have given up, whereas we could have helped that youngster had the parents received the help at an earlier stage. If we had avoided placement, or cut down the length of the placement or provided permanency through adoption, we would be more effective in providing a stable home. This is the thrust of the legislation reported out.

There's no question about that fact that we find ourselves hamstrung in many ways because of funding problems, excessive administrative costs for supervising and monitoring things.

We do have to test the cost effectiveness, we have to be accountable. But the extent to which accounting is made in this direction does get to be a problem in agencies.

I think the work that you have done on this has been exemplary. Your committee really understands the problem; we would like to have the committee continue to keep kids out of party politics and to work for their benefit.

Mr. CORMAN. Thank you. John?
Mr. ROUSSELOT. Thank you.

STATEMENT OF JOHN MEIER, DIRECTOR, RESEARCH, DEVELOPMENT, TRAINING AND CLINICAL DIVISION, CHILDREN'S VILLAGE U.S.A., BEAUMONT, CALIF.

Mr. MEIER. Thank you. It's nice to see you here in sunny California Congressman Corman and Mr. Rousselot, it's a pleasure to address you as well.

I bring my congratulations and best regards naturally from the several hunded IOI agencies that belong to the association and they are all so pleased and courageous with the work that they're doing in this field.

The field isn't terribly popular. I believe it was Vice President Mondale, who was then Senator who characterized our national posture as one of giving something like 10 percent of the budget to 40 percent of the population who represent 100 percent of your future and you see visionaries like yourself addressing on these kinds of issues.

I also must confess my colleague, Dr. Evans, is also doing child advocacy work, I believe, of 15 juvenile judges and referees and others at a luncheon where he was addressing them.

The issues have been addressed already in elequent testimony to the concern of child welfare. The notion that child abuse is sort of a new semantic of some kind in our language I think has some validity.

I got my postdoctoral training in this field in the school of hard knocks, if you'll pardon the pun because it was at the University of Colorado Medical Center with Kempe and Steele and Fraser and Helfer and others who were pioneering this work. We had the child battering team and came to the conclusion—an early conlcusion that in fact this was a quite severe syndrome and champion in coining a term so we did not get trained in this formally in respect to disciplines, but we learned about it in the field where it is at its ugliest worst.

I think the whole motion of institutions, is one that you people have addressed in H.R. 3434 and I would suggest that institutions by themselves are not necessarily evil.

The family itself is an institution and I'm certainly champion of that. I dare say that the House of Representatives and the Senate and so forth are institutions which we champion because of their application of balance of the checks.

I think that the schools and the Project Headstart which you recognized from the past has a long-term effect on child development, our institutions which are left. I have concern that H.R. 3434 can be misconstrued with regard to institutions particularly the stance that we be institutionalized by society literally as has happened in this State, throwing babies out with these institution backlog and then recapped by geriatrics in institutions and other nursing and ill-prepared sites for this kind of needy child.

An institution is characterized by—anyone who's ever worked with Black Wolfensberger is more concerned with the training level of the retarded child. The child in the situation where we are dealing with more of the facts of God; be it development delays that without per-

petrated upon the child by another human being willfully with minimal intent. I think we're now dealing with the facts of man and time and we're addressing it in terms of abuse and neglect.

In that case it is slightly different, respectfully; one that I agree with and appreciate as Director of the Office of Services of Child Development, Children's Bureau, we really did address the national statistics and drafted the initial legislation of Public Law 932.7 and its sequel.

At the institution, if I put that in quotes, where I have been living and totally immersed for the past 3 years—we've developed what we call the Children's Village. We call it Children's Village U.S.A. because of the fact it is a bridging effort to actually identify problems, train personnel, do research, provide any disparity of response to the whole variety of things, of views around the abused and neglected children.

The notion of the nuclear family may be again a term that can be used in two ways. You've heard enough about the Three Mile incident; that nuclear exhaustive explosive or implosive and in some families which I dare say are the releases here and are the most ideal setting—the setting in H.R. 3434 which can also in some instances be the emotions here that indeed a man's home is his castle; but also to be—there are some children living in dungeons in those castles. They are totally restrictive. The battered groups, sexually molested or exploited and so forth. So, to just blankly state that the best place for a human child is with the family maybe explosive in some inner terms.

See, the U.S.A. using the "village" term at this time was conceived by this I.O.I. organization which used to be International Orphans Inc. and was led by two founding persons which is Mrs. Sara O'Meara and Mrs. Yvonne Fedderson, after some 20 years of providing hospitals and orphanages for mixed-blood offspring overseas in Vietnam and Japan but now have focused their energies on a local problem; locally—continental United States so far. Local in the sense that it is right here in our own backyard, literally down the street; that these problems are arising.

When they chose to refocus their energies on something nearby, the then-Governor Reagan and the department of public social services authorities advised them to engage in this undertaking. So this is in fact a private-sector response to the public-sector needs and has now been open 2 years and it's with mixed emotions that I must say we are flourishing; a mixture of actually being—of having to do with the fact that there is such a need for us.

One thing I would urge you to consider in this, what may be an all too blanket notion for the institutionalization, is that an institution itself takes on another kind of life, spirit, if you will and it becomes in some cases, at least for a period of time, the psychological parent to a child.

What I'm suggesting is that even in the books such as that written by Frued, Solnit, and Goldstein entitled "Beyond the Best Interests of the Child" it's clearly pointed out that a child does need a psychological family of a parent at least; a parent defined by Louis Bronfenbrenner is a person who shows untraditional cause or regard for another person. Louie and I have discussed this at great length and it can be stated, and this is my opinion at this point, that the institution itself becomes this psychological parent in some cases.

We are concerned about reparenting as well. We have an extensive Saturday program to which parents come every week and learn about the awesome responsibilities and the glories of childhood—the joys of being a full-fledged parent. We have homemaker visitors who then followup on some children who are back into their homes. Planned reunification has in fact been accomplished, which is not in all cases.

There is also a realization of a massive amount of community resources including those you've heard from this morning and I don't want to reiterate that.

One short aside which was talked about by Congressman Corman, the expression about corporal punishment has to do with—in fact it invokes all sorts of déja vu's by the Federal service when testifying before the Supreme Court with regard to this.

In fact the schools have become in some instances schools of violence and there is a correlation, I am positive, between the amount of corporal punishment that is administered to students and the amount of vandalism and the violence that is taken in reciprocity, wreaked on that school environment.

I think emotions have gotten mean and accepted are certainly very salient and should be reviewed by a study of justices.

We tried, B. F. Skinner tried, everybody else tried and now let's say the children cry. This entity which we have created we are studying very carefully. In fact, I.O.I. is so interested that it has invested over $200,000 a year just constributions in the Nation for researching and clearly defining what is happening to both the children and to parents learning this remediation or rehabilitation effort.

We are unique in this instance; we are focused exclusively on abuse and neglect of children to have the large and able research division. We have a capacity of about 72 children presently and those range from 2 to 12 years of age and they are in residence 24 hours a day. Many are abused in a variety of ways. They all have emotional traumas. Father Tom referred to these children as sort of being an eternal funeral and we refer to them as "swiss cheese" children, children who have not had adequate input on any variety of the kinds that flesh them out and making them robust and strong. We are seeing them thrown down in an emotional way which I can substantiate for you with research but I don't wish to belabor the point.

There are multiple therapeutic opportunities many of the hundreds of staff, and of course with varying degrees, can see. Because we think it will not only be exciting for the children we followed out the testimony of what's actually happening. It's right there in the U.S.A. Mr. Jensen asked me to address a rather intriguing issue—I trust you people must feel in your own guts—and that is a kind of tension that exists whenever courts or any other social agency moves in and says to a parent, "You're not doing your job well enough to keep that child home or not doing well enough to keep that child in the home without some additional help."

We, the society, feel it must move in and remove the child and in removing makes judgments about a person's severance of rights, temporary custody or to sort of get them back together or we'll work with you in your home and tell you at least some of your psyche and your family life.

This tension we feel right within our village because we have both the child workers who get to know these children very well, truly love them and do more than that. The Federal law says love is not enough and love we think is certainly an important ingredient. They do this—they attach these children as much as the children counterattach to them—a bond—and then the court—sometimes rather arbitrarily—will say let's put the child back in the home and until recently we really haven't had the kind of concrete milestone as the family development. We call our love the same thing. In order to make an informed judgment about whether or not that family is really got to be reunited with the child. This is one of the more intriguing aspects of our research and applied programs efforts; is fine tuning that process of estimating progress in terms of therapy in the village or in outreach efforts on visitors and so forth and make a truly informed judgment about when that tension is such that it's time—I'm talking about constructive tension—much of stress can be positive, too. You heard a lot this morning about negative counterparts of stress but in a dynamic organization stress is what keeps it growing. It's the metabolism. It's the homeostasis of that organization.

Without stress between anabolism, which is the growing number of cells in the body—if you'll pardon the analogy—and catabolism, which is the dying number of cells in the body—even in the live body.

We think tension and the constructive almost adversary process which goes on right within our walls is in fact addressing these somewhat gut-rendering decisions we have to make about the future of these children and their parents and attempting to research that and to document that and carefully refine measures of it has turned out to be one of our exciting challenges.

It then enables us to go back to our childhood workers staff and train them about these things—these dynamics—these very same dynamics that most parents, ourselves included, I daresay, have never had any instruction about it so we don't even know when we're about to lose our cool.

This isn't a cliche but we believe that most parents love their children very much but some don't love them very well. And in our parenting program we address ways in which those parents raise their children and give them the inalienable right they have toward optimum self-naturalization—a maximum growth development within their potential.

Well, I would be very pleased to go on with several of these issues and I assure you that in the 3 years out of the Village, other institutions and Washington, D.C., is getting totally emerged in the advancements, efforts that we are now taking and has been exhilarating and in many ways we think will contain a payoff for the kinds of things that you people are investigating—that will far exceed the investment cost; benefit analyses and so on we go through we will be pleased to share with you and the accountability in which we are all held to and in regards to other people's children I think is legitimate sometimes gets tedious at least and yet we've endorsed things like Federal interagency and day care departments. Secretary Harris has just signed off on I think part of your next challenge is to identify standards, to various ways not only standards for institutional care but instructional care, the very ominous concern about the family care. What are

the minimal criteria for parenting? I'm not suggesting any credentials or licenses but isn't it peculiar that we have to have a license to open up a restaurant or drive a car or whatever else and yet only have my logic to fancy to be able to raise a child; not any real education does that entail.

Well, thank you for your patient hearing. Good luck. You've got us all behind you.

[The prepared statement and attachment follow. A pamphlet, "Children's Village U.S.A.," has been retained in the subcommittee files.]

STATEMENT OF JOHN H. MEIER, CHILDREN'S VILLAGE U.S.A.

May I first express the sincere gratitude and congratulations from Sara O'Meara, Yvonne Fedderson, the several hundred dedicated IOI ladies, and myself, all of whom deeply admire the work you are doing in championing the cause of abused and neglected children in this Nation. This is especially appreciated in light of the relatively unpopular nature of this work in behalf of children and youth who, in the words of Vice President Mondale, receive approximately 10 percent of the national budget, constitute about 40 percent of the population and represent 100 percent of our Nation's future.

May I convey the deep regrets of my esteemed colleague, Dr. William Evans, the new Children's Village U.S.A. (CVUSA) Executive Director, who is at this very moment addressing a distinguished group of Juvenile Judges, Commissioners, and Referees in L.A. County through whom many of our CVUSA residents are referred.

Regarding Dr. Hershel Swinger's earlier observations about the training of Clinical Psychologists about child abuse and neglect, I would have to concur that in my own formal training in the same field, a topic with this name was not part of the curriculum. My education came literally from the school of hard-knocks where battered children were being evaluated and treated at the University of Colorado Medical Center under the Direction of Dr. C. Henry Kempe who chaired the Department of Pediatrics where I was an associate professor for nearly a decade. As you know, it was Dr. Kempe and Social worker Mrs. Betty Elmer who identified and coined the "battered child syndrome" nearly 20 years ago. Dr. Kempe's Center for the Study and Prevention of Child Abuse and Neglect in Denver has spawned and sharpened the skills of many other authorities in the field of child abuse and neglect such as Drs. Ruth Kempe (his wife), Brandt Steele, Harold Martin, Barton Schmitt, and Ray Helfer, plus lawyer Brian Frasier and Judge William Delaney, several of whose names were mentioned in the earlier testimony and appear frequently in the professional child abuse literature.

The place of residential child care in the continuum of services for abused and neglected children and their troubled families is a many faceted topic to address in the short time allotted. Permit me to focus upon only several salient aspects since other persons have described other important facets earlier.

There is an underlying theme in much of the testimony and current literature that in one way or another indicts anything "institutional" as being less than the most humane or least restrictive placement for children and youth. This pejorative connotation of any large group setting for children has led to plaintiff pleas for and professional pushes toward universal deinstitutionalization as a desirable and ultimate goal. Your bill H.R. 3434 carries some of this message and runs the risk of being misconstrued as a wholesale indictment of the entire residential child care effort. Authors ranging from Blatt to Wolfensberger have written impassioned testimonials regarding some of the worst institutional practices typically associated with trainable mentally retarded children and adults in an effort to eliminate the entire institutional system and "rehumanize" child care in the United States. Having participated on several site visit evaluation teams to various state schools for the mentally retarded, whose developmental disabilities were regarded as Acts of God, it did seem indefensible that some were being maltreated in the dehumanizing ways which have been observed and reported elsewhere.

However, these hearings, and the many which have preceded them and led the way to the landmark Public Law 93-247 regarding Child Abuse and Neglect, plus other movements over the past decade, have raised our awareness about the

failure of another institution in America. We have learned that the sacrosanct institution of the American family is where acts of man(kind) are causing damaged children. And yet, there are many persons imbued with a somewhat naive rescue fantasy (which incidentally motivates many of us to endure this sort of very trying professional work) who make pleas for never removing a child from the family institution. And yet, too many cases the traditional family institution is the most restrictive and dehumanizing environment imaginable—the very antithesis of the spirit of H.R. 3434. Granted, a person's home is his/her castle but what about the children living in the dungeons of some of these family institutions tortured and destroyed in various diabolical ways? Although the traditional nuclear family has much to be said for it, some nuclear interactions are indeed explosive and consume all of the reactors involved. When the critical mass of certain personalities, histories, stresses, and behaviors combine, the results are far worse than the recent episode of the Three Mile Island failure. In many of these volatile instances, the precipitous and relentless reunification of an abused or neglected child with unrehabilitated parents or placement with untrained nearby relatives, foster, or adoptive parents, is strongly counterindicated if recidivism is to be prevented. Although we do believe that most parents love their children very much, there are many who do not love their children very well and until they learn to do so, some physical and psychological distance is often in their mutual best interests. Thus, there are some benign and some malignant examples of each kind of institution and to stereotypically condemn all institutions as inherently good or evil, growth-facilitating or abusive and neglectful, would be unconscionably myopic. We all remember instances of overzealous deinstitutionalization efforts wherein the baby was literally thrown out with the bathwater and developmentally disabled children were pushed out only to end up in less appropriate nursing homes.

In such hearings as these, as in government generally, you hear a preponderance of complaints, citations of violations of human rights and other legislative and regulatory problems, since that is the nature of government and especially such fact-finding hearings to redress injustices to your constituents. In my days as Director of the U.S. Office of Child Development and Chief of the U.S. Children's Bureau (two more institutions), I wondered if anything was going right with such programs as Headstart, the Federal Interagency Day Care deliberations, the new National Center for Child Abuse and Neglect, etc. since I heard primarily about the controversies, failures, malfeasance, and related problems. Nevertheless, these programs and proceedings have endured and now provide guidance to us all in the early identification, study, treatment and prevention of child abuse and neglect. The salutary long-term and cost-effective results of programs like Headstart represent the beneficial effects of yet another institution (U.S. Dept. of HEW) and I daresay we agree that our Democracy and its components such as the House of Representatives are benign institutions designed to promote the general good and welfare. Certainly we would not want to do away with institutions like hospitals and yet we have many examples of violations there too. Such institutions are constituted with checks and balances to prevent self-serving interests from abusing the system or one another. Violent families do not have these built-in protections.

Today I would like to share with you some thoughts about a new institution, IOI's Children's Village, U.S.A. (CVUSA) which was conceived for Love Of A Child and dedicated to the proposition that every child has certain inalienable rights, including a fundamental right to attain optimum growth and development. CVUSA's life span is only two years since it was first opened. Although a young and still somewhat fragile organization, it is living and well and beginning to take on a personality which has proved to be very healing to abused and neglected children and their troubled families.

Mr. Chairman, as you know, CVUSA was borne out of the hard labor by several hundred ladies who over the past 20 years have demonstrated a dedicated altruism toward the best interest of children throughout the world, particularly mixedblood offspring of our military in Japan, Korea and Vietnam. They have now combined their collective expertise and wealth of energy and resources into creating a new phenomena which is becoming the psychological parent for many very needy children. Much as Freud, Solnit & Goldstein pointed out in their classic essay entitled, "Beyond the Best Interest of the Child," CVUSA is gradually becoming the parent surrogate to these deprived children and adults. Even though love is certainly a major indispensable ingredient in the healing CVUSA experience, as is the tincture of time during which children and parents get their acts together, the CVUSA program is also a concentrated therapeutic

experience in a unique community designed especially for parents and children modeled in part after Bettleheim's orthogenic model (and he, himself, has written a book entitled, "Love is Not Enough").

This CVUSA institutions/community which has taken on its own life as a robust infant in the field of interdisciplinary service, research and training is constantly self-conscious about not creating further complications of institutional abuse and neglect which would certainly be an horrendous compounding of a child's previous trauma.

While the children reside at CVUSA and participate in an extraordinarily enriched program of multiple therapeutic opportunities and experiences, their parents participate in a re-parenting program, where they must learn and demonstrate parenting skills which eventually may qualify them for reunification with their children. Most of these parents love their children very much but not very well and the CVUSA parent rehabilitation efforts are focused on enabling these persons to learn alternatives to the brutal, de-humanizing, corporal and psychological punishment and pain inflicted as a means of disciplining. They learn the true meaning of the ancient maxim "spare the rod and spoil the child," namely that a rod was a unit of measurement and refers to boundaries and suggests that when one fails to give children direction, to lead them by example and to clearly outline and maintain limits of behavior is to fail that child. A disciple is a learner and a follower and hence the word "discipline" refers to enabling children to knowledgeably follow the example and teachings of the leaders in the CVUSA community.

Mr. Chairman, if you will pardon a brief tangential observation prompted by your inquiry of a previous witness regarding corporal punishment, I would like to add the observation that the educational institution is the only public institution in which we the people sanction physical assault on other persons. Your observations about the seasoned wisdom of the Marine Corps and even the prison system's finally eliminating such corporal punishment are instructive indeed. In 1976, the two hundredth year of our enlightened Nation's existence, we presented evidence to the Supreme Court, supported by such authorities as Professor B. F. Skinner, a world reknowned expert on the modification of human behavior, that such corporal punishment in the schools significantly increased the violence and school vandalism among those children and youth on whom it was inflicted.

Getting back to CVUSA, may I remind you that this entire concept represents a private-sector response to a public-sector request, borne out of conferences several years ago with the then Governor Ronald Reagan and several Los Angeles Department of Public Social Services authorities. IOI's CVUSA has now provided a residential respite for over 70 abused children and their troubled families. It is a pilot program to investigate the best combinations of service, training and research for identifying, understanding and healing cases of child abuse and neglect as well as developing training and appropriate research projects for the ultimate prevention of much of the abuse now being uncovered. With your permission I would like to submit for the record two brief statements about the CVUSA program and an illustrated brochure which describes and depicts the entire concept and setting. Moreover, since you will have the opportunity to make a site visit on Wednesday, I would submit that the concrete reality of this magnificent achievement (by the amazing and talented ladies you so graciously acknowledged earlier) will be the most eloquent testimony of all.

As an additional response to your earlier inquiry about public consciousness-raising through the media, may I add that we are all most grateful for your support of IOI/CVUSA's two hour television special entitled "A Time for Love," which is serving the twofold purpose of educating the public about child abuse and neglect as well as helping us to raise the necessary money to provide a program and supportive components which in fact meet the many recommendations you are hearing during these two days of testimony. In addition to the two hour speical, we were also instrumental in developing a television film produced by David Ladd and starring Cheryl Ladd entitled "When She Was Bad," which is also quite instructive about CA/N and televised nationally. We are most pleased with the friendship and support from the Ladds and others of their caliber including yourself Mr. Chairman, for support of and participation in our media efforts. The response for additional information about CA/N and the generous support from compassionate citizens throughout this land has been enormous and we thank God for it.

Your able staff member, Mr. Allen Jensen, requested that I briefly address another phenomenon, which is illustrative of the dilemmas encountered in this field of CA/N. Just as some relationships seem to take on a life and have a personality of their own, so do organizations and communities like CVUSA. IOI's CVUSA is not only living and well but is a dynamic organization dedicated to the best interests of each child in residence which dedication causes a kind of creative tension or positive stress throughout the organization/community. You have heard largely about the negative aspects of stress and how it can overwhelm an individual's impulse controls and break down a family's integrity.

There's a kind of delicate homeostasis that exists within IOI's CVUSA which becomes most apparent when various staff members must come together and make the often agonizing decision regarding whether or not a family is ready for reunification. CVUSA has multiple child care workers who live 24 hours a day with these children and who develop a reciprocal attachment to the children over time. And since these relationships are by design more intense and purposively therapeutic, the degree of attachment and dynamics of transference and counter-transference become very profound. These child care workers are trained to get inside the psyches of these young traumatized children and eventually to become true guardians ad litem and advocates for their welfare. On the other hand, we have a thriving parent program wherein the parents who have abused and neglected their children are also being healed and becoming more competent human beings. Our interdisciplinary clinical staff, who relates to both the children and the parents often find themselves at very awkward choice-points with respect to helping to determine the destiny of the family unit. Add to this dilemma the parent advocates, usually persons in the traditional social services and court systems, who have set as an overriding goal the ultimate reunification of the family and who for both traditional and financial reasons continue to advocate for this not to mention the parents themselves, who persistently insist on having their children back, ready or not. This whole scenario constitutes an internal adversary process in which we often experience some very intense disagreements between considerations and conscientious people in behalf of children's rights versus their counter-parts in behalf of parents' rights.

This internal creative pressure has forced us to systematize our assessment of progress on the part of children and parents in the CVUSA program. With the expert assistance of UCLA's Neuropsychiatric Institute and Lanterman State Hospital's Research Group we are refining some client tracking and progress assessment procedures and instruments which will have widespread application in assisting in this decisionmaking process. As my colleague Tom Kubasek has just said, these children arrive and often seem to be having a kind of funeral going on inside of themselves, mourning their lost albeit violent, relationships and absence of positive human interaction. We refer to these children as "swiss cheese" children, since they have suffered from a serious lack of caring input and have all kinds of holes within their constitution which we attempt to therapeutically either refill or around which strengthen the supporting shell such that the person within can better cope with life's inevitable vicissitudes. And as you have already heard, many of the parents also require the same kind of rebuilding since, in all too many instances, only a generation ago they were in the same predicament as their children are in today. It typically takes much longer, at least a year, to rehabilitate these less resilient "adolescent" parents. Since their behavior patterns have become very deeply grooved over the years.

We must make these critical decisions about reunification or severance of parental rights in the most informed fashion possible. Because of the creative tension which exists between the child advocates and the parents advocates within the CVUSA program, we feel certain that the rights of neither will be over looked or violated. As evidence for our success in this process, of those children whom we have recommended and supported for reunification with their parents, there has been no repetition of CA/N to date. Of course, we never really close a case just because they leave the CVUSA community. Our continued follow-along with lay-family aides remains available and CVUSA's doors are never closed nor are our phones ever out of service. As new upsetting events occur we are prepared to help present and past residents cope with each, while at the same time enabling them to become increasingly responsible for their own lives.

You have also learned that many children who get into the foster care and other out-of-home placement situations stay there for a long time and in ping-pong fashion are bounced around from place to place, each time suffering an additional blow to their sense of self-esteem and general level of competent cop-

ing with the greater ruthlessness of a cruel world. We would respectfully submit for your consideration that for some children and families where the prognosis for reunification and/or adoption is especially poor, that in fact this dynamic organization of IOI's CVUSA may itself become or remain as the best available psychological parent for such children until they reach the age of majority. Granted there is some instability in any large organization with regard to the individual staff members who come and go. This is the characteristic metabolism of a larger living organism just as anabolism, or the growth of new cells must exceed catabolism, or the death of old cells, if the organization is to continue growing and developing. IOI's CVUSA now has a stable metabolism and as an entity represents the most stable, pleasant, compassionate, and supportive psychological parent some of these hard-to-place children probably will ever have. Some of these survivors have not been passed around in the system because they are easy or pleasant to live with. Nevertheless, as the requirements for intensive psychotherapy and other sorts of individual specialized attention subside somewhat, they may become residents in the CVUSA community who will assume responsibility for helping other new residents become acclimated. Much as in the Kibbutzim in Israel and its counterparts elsewhere, some child residents may actually become "peer therapist" for their friends. CVUSA's long term plans include the preparation of these youth for employment in a variety of skilled trades or other careers. Thus, from 2 through 12 years of age, they will be engaged in the serious work of children's play and general growth and development as important people. As they reach adolescence they will then be exposed to many of the preparatory stages for careers in various apprenticeship relationships, with opportunities to learn and work within the CVUSA mini-business community.

We are most eager to host you at IOI's CVUSA which is a community in which everyone can thrive. We find that the peals of child laughter give more eloquent testimony to the efficacy of the CVUSA program than some of the other more widely recognized indices, which we also document. We have many research reports and other supportive information which we would be pleased to share with you and your committee as you see fit. Thanks again for granting us this opportunity to share with you what many consider to be a most important and unique breakthrough in this CA/N field. Best wishes in your continued role as champion of children and their families.

A PROJECT OF IOI

Founders:
Mrs. Robert O'Meara
Mrs. Don Fedderson

Children's Village USA

IOI/CVUSA
RD&T + CLINICAL
DIVISIONS

April 22, 1980

To: IOI Executive Board, CVUSA OAC Members, and other interested persons

From: John H. Meier, Ph. D., Director, RD&T & Clinical Services Division

SUBJECT: **ANNUAL REPORT OF RESEARCH, DEVELOPMENT & TRAINING (RD&T) DIVISION.**

The attached report represents much of the salient data accumulated during the past fiscal year (4/1/79 - 3/31/80) and updates the first progress report prepared last May. The general format of this report is to chronicle some of the highlights in the growth and development of the RD&T Division, to graphically depict the characteristics of CVUSA's children, parents, staff, and related information, and to share the highlights of the latest developmental planning and training.

RESEARCH: As was done in the previous progress report, whenever possible the CVUSA data are presented on the top half of each page over the data from the National Survey conducted by the American Humane Association. A significant difference between the current CVUSA data and the previous CVUSA data is that the new charts are based upon 70 abused children and their troubled families in comparison to only 40 subjects some 9 months ago. The trends shown in the earlier CVUSA data are essentially supported by the findings based on the enlarged population. This further underscores the fact that the children and families at CVUSA are among the most traumatized and troubled victims and perpetrators in comparison with the broader spectrum of child abuse and neglect portrayed by the American Humane Survey of nearly 100,000 reported cases from throughout the U.S.

ANNUAL REPORT OF RESEARCH, DEVELOPMENT & TRAINING (RD&T) DIVISION CONTINUED:

In addition to the comparisons with the national population, several other internal studies are graphed to further illustrate the growth, development and dynamics of IOI's CVUSA. With the recent renovation and opening of the fourth cottage, CVUSA's new licensed capacity is for 72 children in residence and our new Social Services Division is rapidly receiving and processing referrals to fill IOI's CVUSA to capacity. At this writing there are over 60 children in residence and we continue to track those "graduates" who have either been reunited with their biological families or placed into adoptive or a similarly suitable permanent setting. There is no evidence that repetition of any CA/N (recidivism) has occurred in any of these cases.

DEVELOPMENT: If one were to evaluate the growth and development of IOI's CVUSA in accordance with standard yardsticks applied to new organizations and businesses, it has enjoyed an incredibly rapid expansion in every dimension including numbers of clients served, staff increments, and a concomitant growth in supporting revenues, thanks to the indefatigable work of the IOI organization and its Divine inspiration. A growth rate of 10% per year is comfortable -- IOI's CVUSA is growing at the breathtaking rate of over 100% per year, a rate which causes considerable growing pains as well as the many exhilarating moments.

This report can scarcely do justice to the constant attention being given to quality control and upgrading of program; however, the improved reputation of the IOI/CVUSA achievements is amply testified to by the increased confidence placed in the program by referring agencies and interested researchers. In order to ensure continued orderly evolution of this concept, there is the serious obligation to carefully plan for future probabilities and mind-stretching possibilities. Consequently, the CVUSA Five Year Plan continues to undergo periodic updating in light of inevitable changes resulting from the new efforts of this extraordinarily

ANNUAL REPORT OF RESEARCH, DEVELOPMENT & TRAINING (RD&T) DIVISION CONTINUED:

dynamic organization.

Planning has been defined as "an improvisation on a general sense of direction" and much of the overall long-range planning helps to systematize and discipline existing procedures. It is important to have a clearly defined operational base upon which to improvise. Therefore, much of the development activity has been focused on such items as a full and clear-cut set of personnel policies, program descriptions for distribution to various individuals and agencies with whom we interact, a case management system, staff on-the-job training, grant applications and reports, publicity releases, legal and legislative testimony, and other related managerial tasks as assigned.

In a continuation of the Five Year Master Plan, we have recently proposed a variety of new endeavors which are logical out-growths of our present pursuits:

1) As some of the older children at CVUSA remain with us and mature into their teen years, it becomes increasingly evident that we must make some special provision for teen-age residents here at CVUSA; consequently, one of the next buildings to be considered for construction on the CVUSA campus is a residential cottage unit for the youth who have grown up in our program. Eventually, this teen cottage may serve other appropriate abused youth who need out-of-home placement.

2) A small building is needed to better house the program and clinical services staff and should be located on the cottage side of the hill where various program staff such as cottage supervisors and clinical staff such as therapists, psychometrists, etc., would be officed. These professional staff perform quality control, progress evaluations, treat-

ANNUAL REPORT OF RESEARCH, DEVELOPMENT & TRAINING (RD&T) DIVISION CONTINUED:

ment planning and management for children and youth in residence. This building would also serve as a diagnostic center for any counties or other agencies which require an outside evaluation of a child and/or family for decision-making regarding future placements, individual treatment planning, etc.

3) Because of CVUSA's relatively remote geographic location and the desirability of attracting student interns and visiting scholars to live in during their rotation in our clinical community, it is necessary to construct a facility to house such persons in a comfortable, productive and convenient location on the CVUSA campus. This motel-like facility could also house some live-in CVUSA staff and serve as a component of the pre-vocational training program discussed below.

4) In an adjoining wing or physically separate segment of the aforementioned motel should be accommodations for parents to live in for relatively short periods of time while preparing themselves for reunification with their children. This may also double as a kind of respite care facility for highly stressed families who need an occasional break from continuing child care in order to prevent an otherwise probable outburst of child abuse.

5) Steps are already being taken to procure and erect a small barn facility to better accommodate the CVUSA animal program, thus further facilitating the pet therapy opportunities for children in residence.

6) Construction of a non-denominational chapel remains in the long-range plan. Nonetheless, regular visits to community churches and from representatives of those congregations have been providing the children

ANNUAL REPORT OF RESEARCH, DEVELOPMENT & TRAINING (RD&T) DIVISION CONTINUED:

with a representative exposure to the practices and belief systems of several religious denominations.

7) As the above plans gradually materialize on the CVUSA property, there will be simultaneous program and facilities development occurring in other locations. We have recently received a grant to acquire a facility in the East Hollywood area which may be referred to as CVUSA's East Hollywood House. Initial tentative plans indicate it should accommodate some children and even an occasional family who are being graduated from CVUSA back to full reunification (a sort of half-way house), serve as a diagnostic center, a crisis center, headquarters for IOI/CVUSA research and computer facilities, and so forth.

8) As the Beaumont CVUSA pilot program becomes fully operational and systematized, other similar model programs will be considered. Starting close to home, IOI's CVUSA would replicate the best parts of its programs first in Northern California (East Bay Area serving San Francisco and Sacramento) and/or Las Vegas, then move on up the West Coast to Seattle, across the Continental U.S. to Boston, and eventually on into Europe if resources permit and God's willing.

TRAINING: This entire effort is unusually dependent upon the quality and quantity of human resources available to deal with the intensive and extensive human problems involved in child abuse and neglect. During the past year we have concentrated upon the development and implementation of a thorough training program for the child care workers who live with the CVUSA child residents. The class has met regularly for three hours every week and participants can receive up to six semester hours of credit through either the University of California at

Riverside (extension) or Mount San Jacinto Community College. We have adopted the most germane materials from a variety of curricula and will eventually have our own tested training course. Because of staff turnover and continued growth, this required training will be offered on a continuing basis - it addresses such matters as child growth and development, discipline, separation, cottage management, burn-out, first aid, parenting, etc.

Other professionals from a variety of disciplines are beginning to formally and informally affiliate with CVUSA. Some are offering services, some doing research and some help in training other professional and para-professional staff. Faculty appointments at several universities and colleges enables CVUSA staff to offer supervised learning experiences to graduate and undergraduate psychologists, social workers, educator, marriage and family counselors, and other interested qualified persons. Furthermore, several persons are receiving on-the-job training under the auspices of the U.S. Comprehensive Employment Training Act (CETA) in various roles as clinical clerk, research aides, librarian, volunteer aide, and buildings and grounds maintenance.

Most importantly, these many trained and in-training specialists are focusing their efforts on helping abused children and their troubled parents to become more effective human beings. Besides the parenting education for the adults (and perhaps for junior high and high school students in the future) we envision a miniature town center here on the CVUSA campus where the older children and youth can learn marketable skills and attitudes. For example, they may become "apprentices" in food preparation, motel operation, animal husbandry, horticulture, arts & crafts, auto mechanics, carpentry, counseling, secretarial work, and other career possibilities. Some Outward Bound types of experiences are also being explored for older children and youth to help them get their acts together before re-entry into

the real world stage.

ACKNOWLEDGEMENTS: It is hoped that this report gives the reader a quick overview of the kaleidoscopic activities and products from the CVUSA RD&T Division. Special thanks go to the RD&T staff members: Cherry Taylor, Secretary; Nieves Sandoval and Marilyn Stuart, CETA Research Aides; and Pat Heller, volunteer research aide/psychometrist. Since becoming Director of the Clinical Services Division, John Meier has less than half as much time to devote to the RD&T Division and must rely increasingly upon these able staff members. Obviously, none of this would be possible without the dedicated work, inspirational vision and continued altruistic support of IOI members and other volunteers. The cooperation of the Cottage staff under Curt Sugiyama, the Dept. of Social Services under Dr. Bill Sallenbach and the Clinical staff involved in the CVUSA core programs for children and parents are hereby gratefully acknowledged. Deepest appreciation is also due Dr. Bill Evans, whose continued interest, encouragement, and leadership are helping to make this IOI/CVUSA dream come true. And the bottom line is that the children, whose gruesome nightmares are turning into peals of laughter, light up all of our lives and urge us on to even greater achievements.

IQI/CVUSA
R & D Divisi
4/80

FIGURE 1a. IQI/CVUSA (1979-80)

REPORTS RECEIVED CLASSIFIED BY ABUSE & NEGLECT

(N = 70)

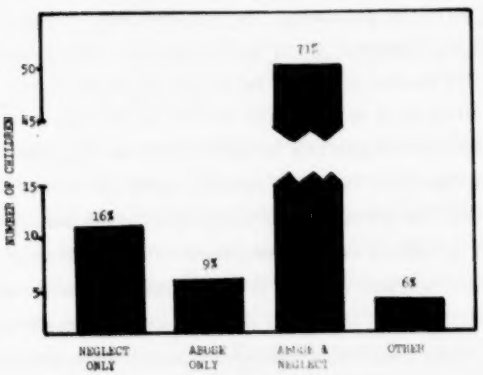


FIGURE 1b. AMERICAN HUMANE

REPORTS RECEIVED CLASSIFIED BY ABUSE & NEGLECT

(N-99,579, 1976-31 STATES-SEE MAP)

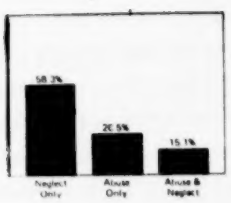


FIGURE 2a. IOI/CVUSA

SOURCE OF INITIAL REPORTS - ALL CVUSA CASES

(N = 70)

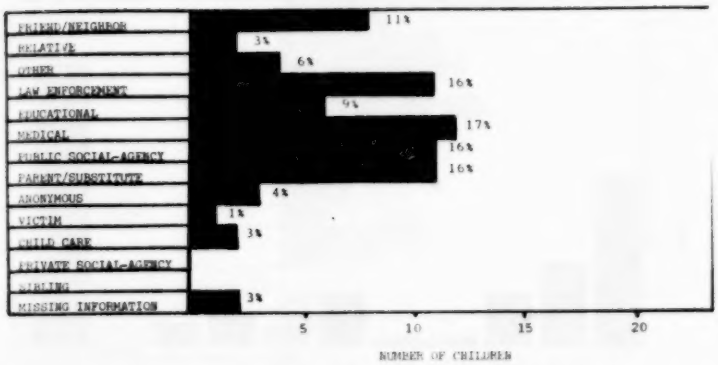
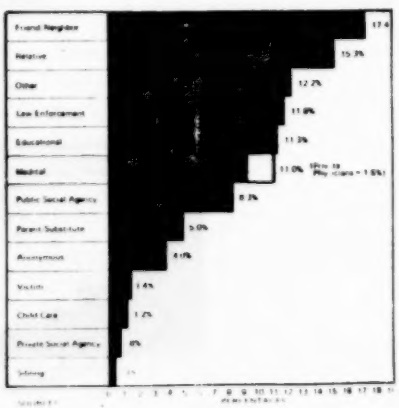


FIGURE 2b. AMERICAN HUMANE

SOURCE OF INITIAL REPORTS - ALL CASES

(N = 99,071)



101/CVUS
R & D Divi
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FIGURE 3a. 101/CVUSA

FAMILY INCOME

(N = 76)

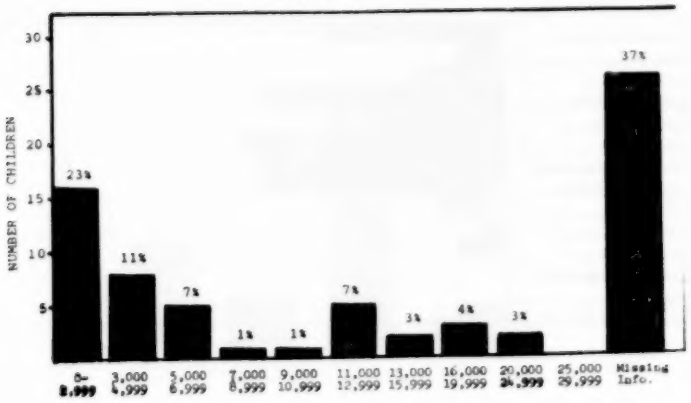
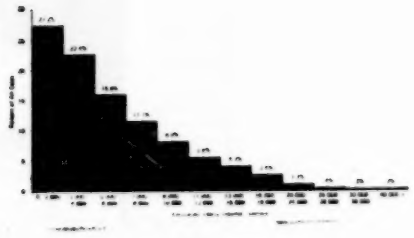


FIGURE 3b. AMERICAN HUMANE

1976 FAMILY INCOME-VALIDATED REPORTS

(N=19,923)

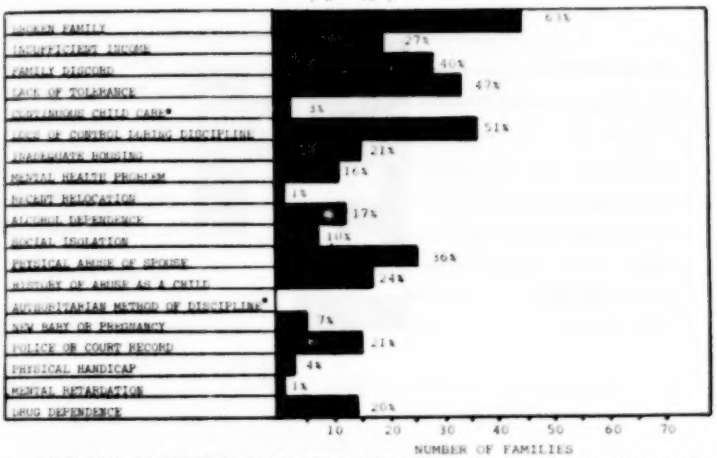


IOI/CVUSA
R & D Divisio

FIGURE 4a. IOI/CVUSA

FAMILY FACTORS PRESENT

(N = 70)



* INTAKE DATA AND RELATED REPORTS DO NOT REFLECT LEVEL OF CHILD CARE RESPONSIBILI
OR METHOD OF DISCIPLINE

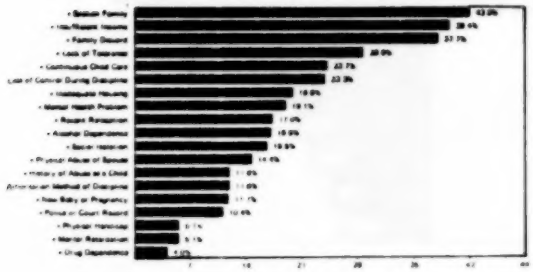
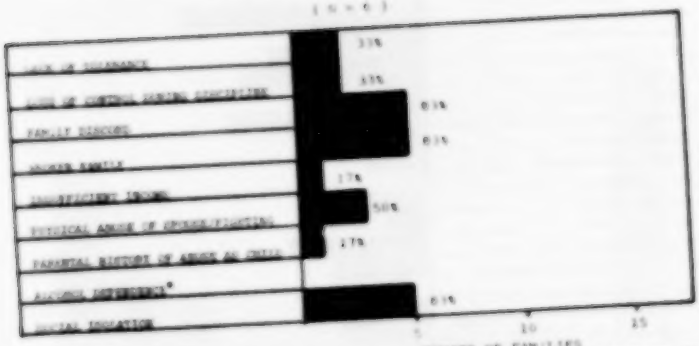


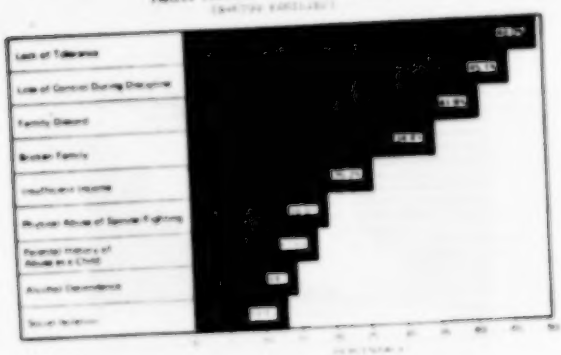
FIGURE 4b. AMERICAN HUMAN

FAMILY FACTORS PRESEN

(N=16,227 FAMILIES)



*THIS INFORMATION WAS NOT OBTAINED AS PART OF INTAKE DATA NOW IS IT SHOWN IN RELATED REPORTS.

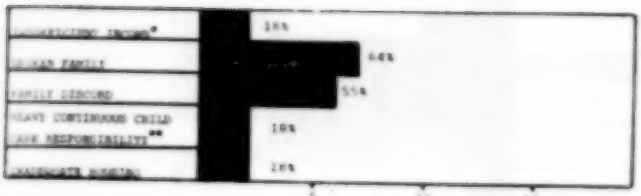


FDI/CVUSA
R & D Division

FIGURE 6a. [illegible]

FAMILY FACTORS PRESENT - NEGLECT ONLY

[illegible]



*INCOMPLETE DATA RE: INCOME ON 50% OF FAMILIES. **INTAKE DATA AND RELATED REPORTS DO NOT REFLECT LEVEL OF CHILD CARE RESPONSIBILITY. LOW INCOME FAMILIES OFTEN CANNOT AFFORD BABYSITTING OR OTHER RELIEF FROM CHILD CARING RESPONSIBILITIES.

FIGURE 6b. AMERICAN HUMANE

FAMILY FACTORS PRESENT NEGLECT ONLY

[illegible]

IDI/CVUSA
R & D Divisi

FIGURE 2a. IDI/CVUSA

SOURCE OF INITIAL REPORTS - ALL CVUSA CASES

(N = 70)

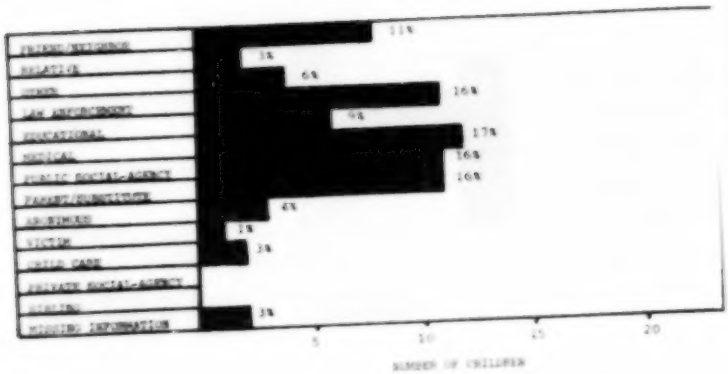
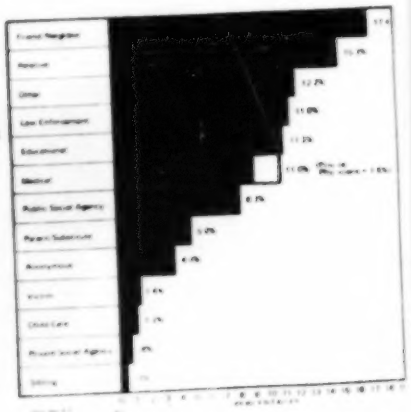


FIGURE 2b. AMERICAN HUMANE

SOURCE OF INITIAL REPORTS - ALL CASES

(N = 99,071)

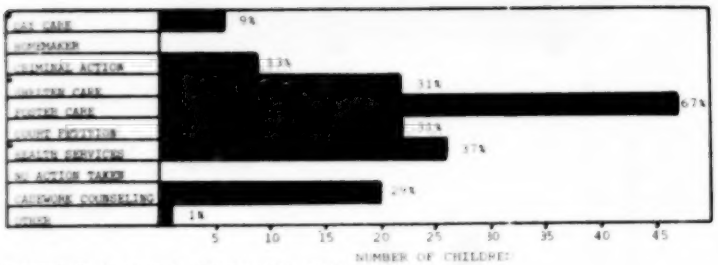


IOI/CVUSA
R & D Division
4/80

FIGURE 8a. IOI/CVUSA

NUMBER OF FAMILIES WHO HAD OTHER SERVICE

(N = 70)



*REFERS TO C.V.U.S.A. RESIDENTIAL CHILD

FIGURE 8b. AMERICAN HUMANE

PERCENTAGE OF FAMILIES RECEIVING EACH TYPE OF SERVICE

VALIDATED REPORTS ONLY (N=32,657 FAMILIES)

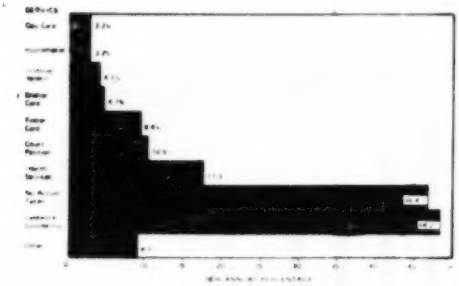


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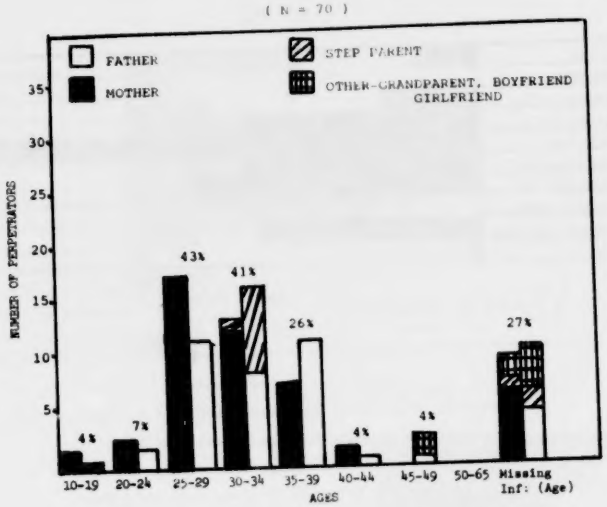
FIGURE 9a. IOI/CVUSA

AGE AND SEX OF PERPETRATORS OF CA/N

TOWARD CVUSA CHILDREN

(N = 70)

IOI/CVUSA
R & D Divis
4/80



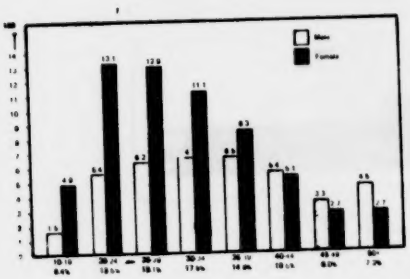


FIGURE 9b. AMERICAN HUMANE

AGE AND SEX FOR PERPETRATORS ON VALIDATED REPORTS

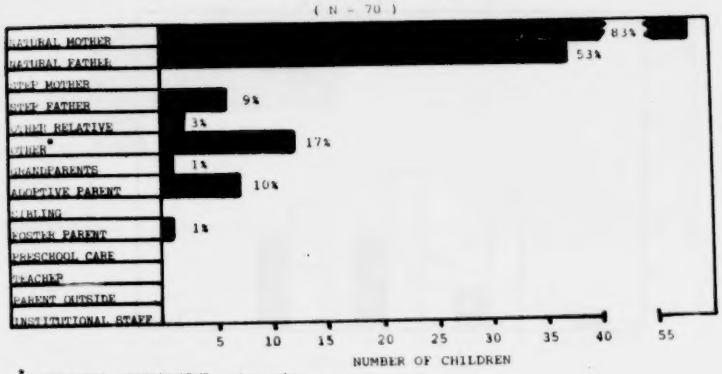
(N=50,600 ALLEGED PERPETRATORS)

IOI/CVUSA
R & D Divisio

FIGURE 10a. IOI/CVUSA

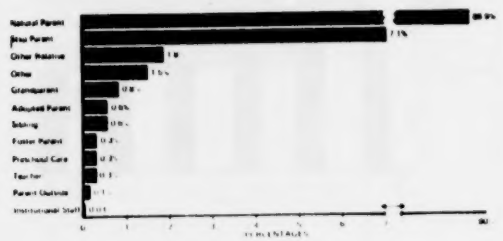
RELATIONSHIP OF PERPETRATOR TO THE INVOLVED CHILD

(N = 70)



*BOYFRIEND, GIRLFRIEND, etc. etc.
(no information re: sibling perpetrators)

FIGURE 10b. AMERICAN HUMANE
RELATIONSHIP OF PERPETRATOR TO THE INVOLVED CHILD
ON VALIDATED CASES
(N=46,150)



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IOI/CVUSA
R & D Division
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FIGURE 11a. IOI/CVUSA

AGES AT INTAKE AND SEX OF RESIDENTIAL C.V.U.S.A.

(N = 70)

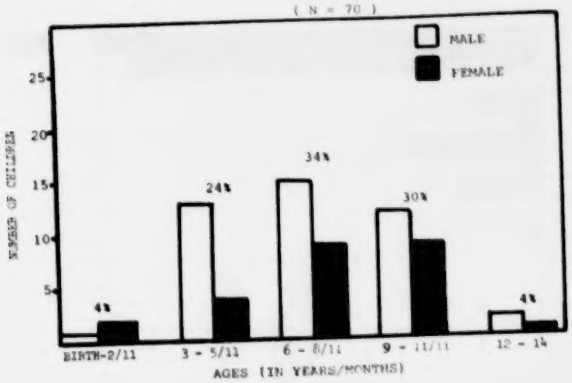
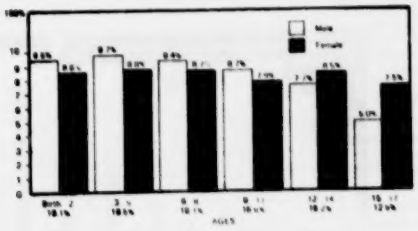


FIGURE 11b. AMERICAN HUMANE

AGE AND SEX OF INVOLVED CHILDREN ON VALIDATED REPORTS

(N=86,602)



IOI/CVUSA
R & D Division
4/80

FIGURE 12a. IOI/CVUSA

MEDICAL SEVERITY OF ABUSE/NEGLECT

(N = 70)

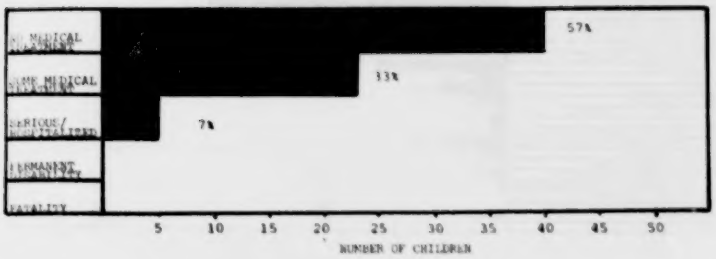
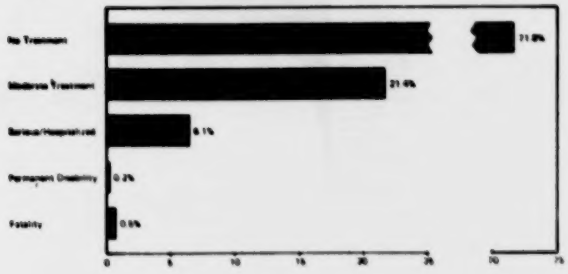


FIGURE 12b. AMERICAN HUMANE

SEVERITY OF ABUSE/NEGLECT FOR ALL INVOLVED CHILDREN

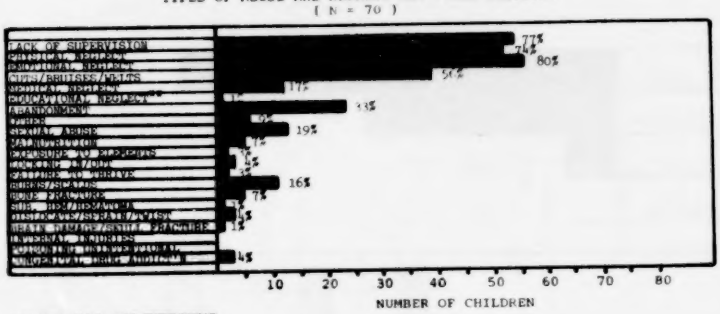
(N=34,900)



101/CVUSA
R & D Divisio
4/80

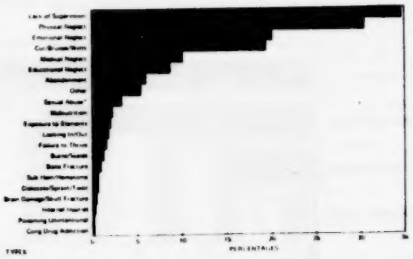
FIGURE 13a. 101/CVUSA

TYPES OF ABUSE AND NEGLECT RE: CVUSA CHILDREN
(N = 70)



ANY ONE CHILD CAN EXPERIENCE MORE THAN ONE TYPE OF ABUSE &/OR NEGLECT. **WAS NOT PLACED IN ANY EDUCATIONAL PROGRAM BY AGE 6 (COMPULSORY) DOES NOT APPLY TO PRESCHOOL CHILDREN (UNDER 6) AT THIS TIME AND MANY CVUSA CHILDREN ARE PRESCHOOLERS.

FIGURE 13b. AMERICAN HUMANE
TYPES OF ABUSE AND NEGLECT ON
VALIDATED REPORTS
(N=93,249*)



IOI/CVUSA
R & D Divisi
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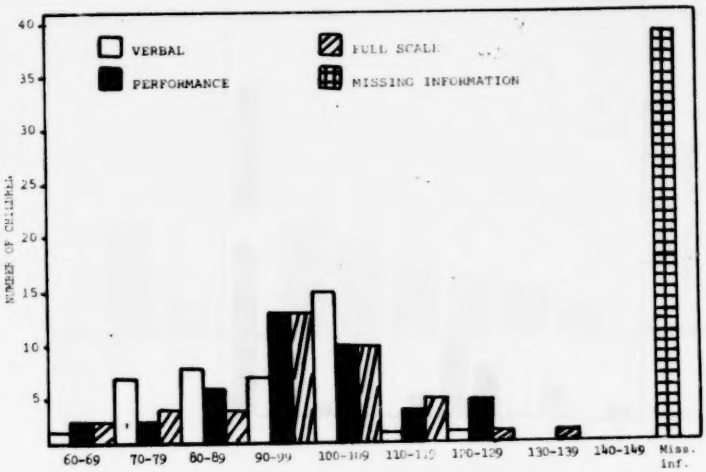
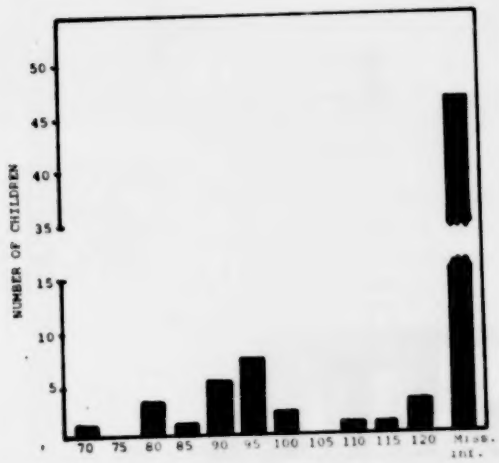
FIGURE 14a. IOI/CVUSA
INDIVIDUAL I.Q. SCORES
(N = 70)



IOI/CVUSA
R & D Division
4/80

FIGURE 15a. IOI/CVUSA
PEABODY SCORES
(RECEPTIVE LANGUAGE)
(N = 70)



IOI/CVUSA
R & D Division
4/80

FIGURE 16a. IOI/CVUSA
GRADES OF CHILDREN
(N = 70)

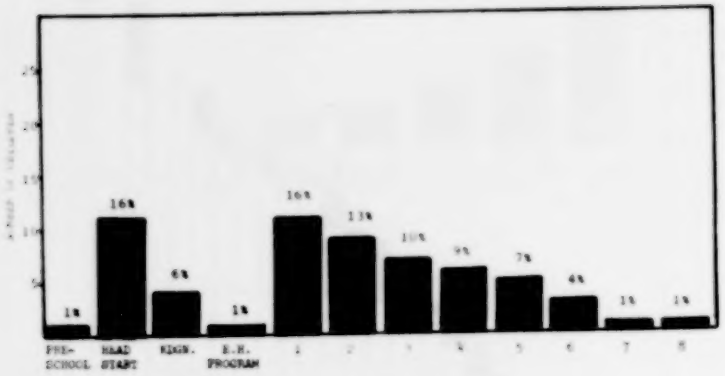
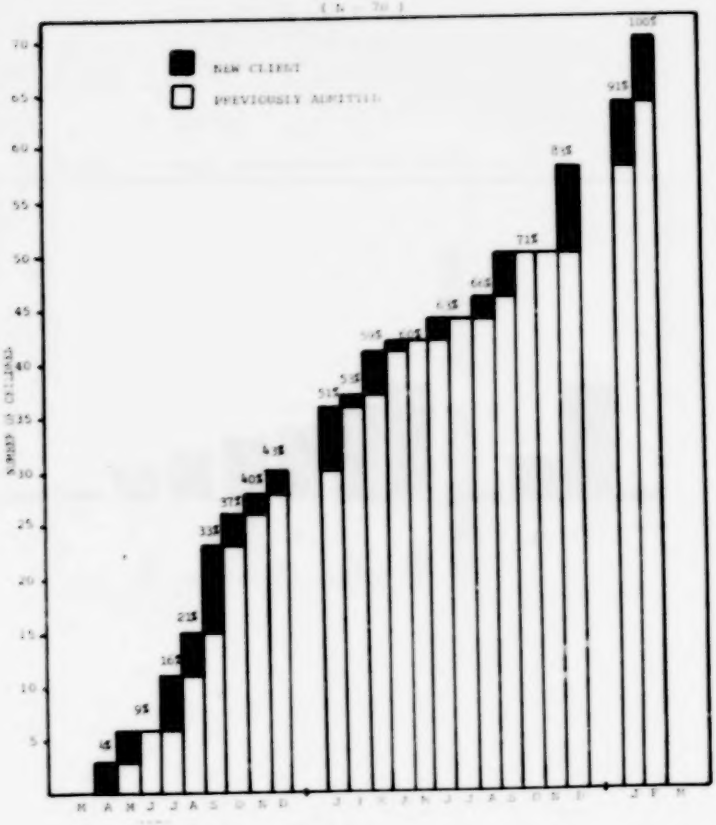


FIGURE 17. IOI/CVUS... RELATIVITAL CHART

POPULATION BY MODE OF ATTENDANCE

(N = 70)



IOI/CVUSA
R & D Division
4/80

FIGURE 18a. IOI/CVUSA

PREFERENTIAL CHILDREN WHO HAVE LEFT CVUSA

(N = 70)

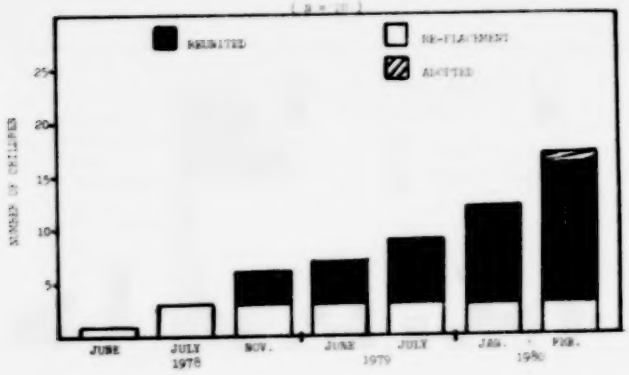
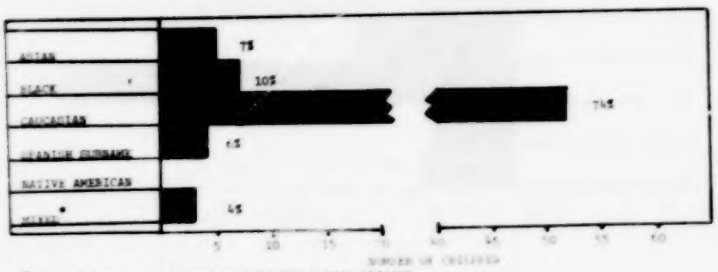


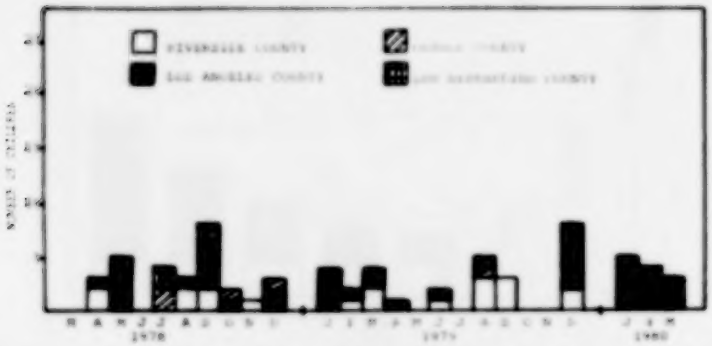
FIGURE 19a. IOI/ CVUSA

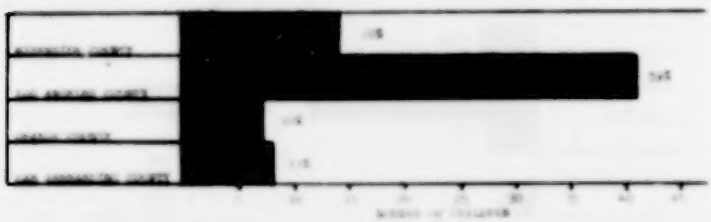
DISTRIBUTION OF NATURAL PARENTS BY ETHNIC ORIGIN

(N = 70)



*PARENTS ARE OF AT LEAST TWO DIFFERENT ETHNIC ORIGINS





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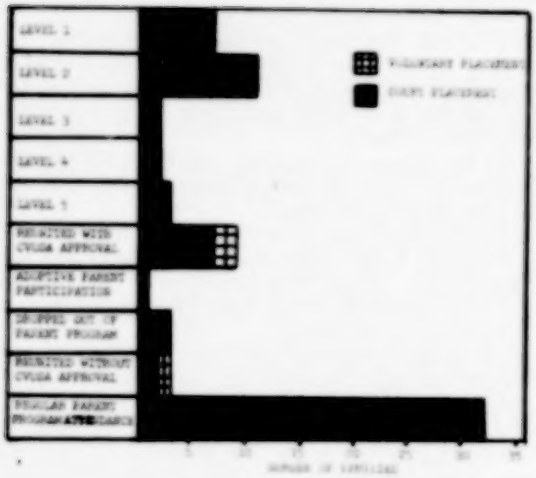
R & D DIVISION
RESOURCE CENTER



Mr. CORMAN. Thank you very much, gentlemen. Children's Village U.S.A. exists today because during the Korean war two young ladies who were there as USO entertainers saw children in the gutter who were very tiny who were half American and half Japanese or Korean. That startled two lives that have probably affected more lives than any other two we can find living today. We'll get to see them Wednesday and their latest accomplishments. I shudder to think what would be next because every time I've talked with them I felt that they were embarking on an impossible quest.

Mr. MEIER. Well, they're raising over $1 million——

Mr. CORMAN. I know, and that's just for research alone.

Mr. MEIER. They would want to say a hearty thanks to you because you were asking about the media. One of the films we like to use is—we write the script for it in large part—was "When She Was Bad" and it is an informative film.

And then with the 2-hour TV specials raised funds but also raised other consciousness. It has truly raised some interest throughout the country. We're very grateful for that.

Mr. CORMAN. Gentlemen, thank you very much. John?

Mr. ROUSSELOT. Well, I just appreciate the three of you being here and contributing further to our understanding of what you do at the grassroots level. You know, Mr. Chairman, that one of these facilities is in my district and one just outside.

I appreciate more than I can say what you have each done to make sure we're aware of not only what you do, but also how you cope with it all. Your facility, Mr. Cohn, in Pasadena is an example of what can be accomplished. We understand the paperwork we create a lot of times and I'm afraid it is too much. We passed a bill just before we left to eliminate some paperwork. We can decrease it. I'll look forward to the material Chairman Corman has requested from you. We'll make sure it is in the record.

Thank you.

Mr. CORMAN. Thank you gentlemen very much.

Our last witness for today is Alex Cota. Mr. Cota, we're pleased to welcome you to the committee. You're going to have to be very brief because we're on a contract.

STATEMENT OF ALEX COTA, INDIVIDUAL; LEAD PLAINTIFF IN CASE "LOS ANGELES COUNTY BOARD OF SUPERVISORS VERSUS THE INSTITUTION: SELMAR JUVENILE HALL"

Mr. COTA. Mr. Chairman, Congressman Rousselot, H.R. 3434——

Mr. ROUSSELOT. Can you tell us—I know you've given us your name——

Mr. COTA. All right.

Mr. ROUSSELOT. What do you do?

Mr. COTA. My name is Alex Cota and I have an action with the county and I'm the lead plaintiff in the——

Mr. ROUSSELOT. What?

Mr. COTA. I'm lead plaintiff in a case as a taxpayer against the Los Angeles County Board of Supervisors in the case gainst the institution called Selmar Juvenile Hall. This is a——

Mr. ROUSSELOT. Selmar Juvenile Hall?

Mr. COTA. Yes. It was built with $9 million of Federal funds which is one reason why it's pertinent here, plus several other factors and I'll conclude the best I can under the constraints of time to explain. H.R.——

Mr. ROUSSELOT. You understand the constraints of time we are under.

Mr. COTA. That's always the way it is, yes, sir.

Mr. ROUSSELOT. You asked to testify and you hadn't been originally scheduled.

Mr. COTA. Well, I really appreciate it very much.

Mr. ROUSSELOT. Try not to try the case here.

Mr. COTA. No. No. No. No. The reason I'm fighting is for a variety of cases and that's the reason I handed to Congressman Corman articles from the Los Angeles Times dealing with the squalor of Juvenile Hall, for example.

You can compare the squalor of the men's State penitentiary and you'll find it very similar so the problem is that our Los Angeles County is leading in what is going across the Nation with the juvenile detention facilities; they become a little more crowded and you have racial conflicts in there, sexual abuse. They become the abusers of children in thousands, not just a one-figure family or a particular family. As tragic as it may be it involves thousands of people who many times we focus on the trees and forget about the forest and the juvenile detention facilities are huge forests of illegalities and child abuse.

And, for example, in deciding—in connection with the H.R. 3434 is—this is a summary—a case worker in many services cannot litigate the need for people out of home placement of a child.

The bill provides the child be placed in the least restricted setting which takes into account the special needs of the mentally and physically handicapped children and emotionally disturbed children.

The bill also requires the children in foster care and placement leave the whole proximity of their families to increase the chances of the child being returned to his home.

Now Selmar Juvenile Hall, which was built with Federal disaster funds, $9 million worth violates the Birch Bayh Act of 1974 to juvenile justices which if you read the bill, we wanted to set up smaller more homelike facilities dealing with the problem of child abuse.

The Selmar Juvenile Hall holds 96 beds which are set aside just for the emotionally disturbed children. And the county police department practically rule in anyway, manner—if a kid is being detained it is the manner to put him in the 96-bed detention facility at Selmar for months on end—5, 6, or 7 months. They're using it as a placement facility where the child urgently needs help.

Moreover, I know, for example, I know of the case where the kid was emotionally disturbed and was put in 5 to 6 months at the Selmar Juvenile Hall. His mother is in Azusa. Now here—it seems like this is just the contradiction to what the H.R. 3434 views to increase family ties; they're tearing family ties down and putting these kids where it's almost impossible for this kid to see his mother. And, this is not the only case.

This is an extremely abusive manner of handling kids because you have to keep in mind juvenile hall is the first contact that a child would

have with the juvenile justice system and the first contact, rather than being least restrictive contact as required by H.R. 3434, it is the maximum security concept. And maximum security in Selmar Juvenile Hall, the entire facility—the entire institution is patterned basically the same as the Central Juvenile Hall solitary confinement unit.

And, believe me when I say this causes extreme frustration for the children and for the personnel who work there. Now, how is this so? You are burdened when you have such a huge institution and it's designed like a cell block with a reforming unit, you have to open and shut hundreds of doors throughout the entire day.

Your staff time is chewed up with turnkey operations or plutocracy. Another thing that was found in this so-called brandnew facility that was built with $9 million of Federal funds, the better behaved children are locked in at night with no plumbing. They have to kick and pound on the door to go down the hall. In other words, another turnkey operation; the expense of the staff to go open the door, let them go down the hall. He has to awaken other children in the middle of the night. The worst behaved kids are in solitary confinement and have their own commode, drinking fountain, and probably a washbasin.

Now in the child's mind—whoa—it's backed up in a bizzare manner. I can go to solitary and have all the plumbing. I don't have to defecate or urinate on the floor.

I tried to explain this to the board of supervisors. And, I said you're not only wasting Federal funds, you're wasting personnel time; you're wasting the lives of children receiving the negative environment of the worst possible kind. It went in one ear and out the other.

Mr. ROUSSELOT. You mean nobody at the county would listen to you?

Mr. COTA. Absolutely not.

Mr. ROUSSELOT. I find that difficult to believe but——

Mr. COTA. All you need do—like I say, I heard about the hearing this morning or I would have brought still more substantiation for you—I can send you the documents to prove the stupidity. This institution is so utterly stupid we utterly wasted our money. We wasted our money just as I pointed out and it's tough for families to visit there, you know. You got out to Selmar and you'll find it sits along the river with rats, with warehouses; there's a Golden State Freeway on and off ramp; public transportation is the only means to that and that's not very reliable since it is in Los Angeles.

So, the entire thing is injuring thousands of children; with at least a minimum of 5,000 children pass through the Selmar facility since September of 1978 and we are doing tremendous injury to children. They learn the worst things—they learn how to be lazy, loafers—you put a kid in solitary and they don't have to go to school.

I tried to make these things have more strength. I said we want to be tough, firm, and disciplinary to a kid. You're not—when you put a kid in maximum prison—what else are you going to do to him. Who cares. And this is what hurts. It's very very severe.

Now another aspect to it, which I gave a copy of the letter—just to show you how the kinds—this is something that you can read for yourself. It's a letter of November 15, 1979. One of the things we tried to relate to the county board of supervisors is, please knock off those status offenders—children who have committed absolutely no crime whatsoever.

Mr. CORMAN. Mr. Cota——

Mr. COTA. Yes.

Mr CORMAN. I have a question at this point.

Mr. COTA. Yes, sir.

Mr. CORMAN. Are there children in that Selmar facility who, have to go out through juvenile court to get into the facility?

Mr. COTA. Well——

Mr. ROUSSELOT. You're not going to accept that.

Mr. COTA. Sometimes there are ways that the final disposition of the case—this is another bad aspect in regards to juvenile halls——

Mr. CORMAN. But——

Mr. COTA. We have a very preliminary issue. We know on the basis of the duties of a police officer who picks up a kid, he puts him in juvenile hall—maybe on Friday night and he can't go to court until Monday. He's there that night——

Mr. CORMAN. It's a holding place just like the jail is—like you think of when they pick up an adult and take him down to the city jail.

Mr. COTA. That's right. Moreover, let me explain to you that it's worse than jail. I mean I asked the county board of supervisors to consider using Selmar Juvenile Hall as an adult facility and not for kids. The sheriff's department made an investigation and said some kids were adults because they had concrete beds; which they are in violation of the minimum jail standards, plus the external plumbing where you can't—he usually has to keep unlocking doors and this is against the law. So, some kids are adults and we have spent Federal funds in this community which is a great injury to children. But again on the status offenders, this is an absolutely unthinkable——

Mr. ROUSSELOT. What's a status offender?

Mr. COTA. A status offender—maybe you get a youngster who's running away from home and as you heard this morning some testimony——

Mr. ROUSSELOT. First of all, what is a status offender?

Mr. COTA. A status offender——

Mr. CORMAN. Well, there would not be an offense if he were an adult instead of a child?

Mr. COTA. That's right. I worked in the poverty cases and one of the areas in one of the schools they had no shoes. The other kids made fun of him. So it seems to be sort of a silly reason but to the kid it isn't.

Mr. ROUSSELOT. Well, what's the bottom line—you know, we're not—I'm not a county official and there are Federal funds involved. What do you want us to do?

Mr. COTA. One, I was hoping that H.R. 3434 could be amended with absolutely no——

Mr. ROUSSELOT. It can't be amended now. It's out of conference and it's on its way to the President.

Mr. COTA. Well, perhaps you can arrange——

Mr. ROUSSELOT. There's no way to amend H.R. 3434 at this point.

Mr. COTA. Any way of restricting the use of juvenile detention facilities to keep status offenders out; is the one reason I would like to——

Mr ROUSSELOT. Status offenders?

Mr. COTA. Status offenders should be kept out of the ——

Mr. ROUSSELOT. Status offenders?

Mr. COTA. Yes, sir.

Mr. ROUSSELOT. Now, you mean to tell me that nobody at the county level will listen to you or what you're saying?

Mr. COTA. I brought you proof; here's a letter signed by Kean Fear. No; they will not.

Mr. ROUSSELOT. I guess this is Baxter Ward's district?

Mr. COTA. Yes, sir.

Mr. ROUSSELOT. Did you see him?

Mr. COTA. All——

Mr. ROUSSELOT. He always helped me. He listens to everybody.

Mr. COTA. The only ones that would listen to us were Ed Edelman and——

Mr. ROUSSELOT. Ed Edelman?

Mr. COTA. Ed Edelman.

Mr. ROUSSELOT. He gave you a hearing?

Mr. COTA. Well, Ed Edelman is my man. He voted against the rebuilding of Selmar.

Mr. ROUSSELOT. So somebody has listened.

Mr. COTA. Well, yeah. But, they're a minority. There's 3 to 2 and——

Mr. ROUSSELOT. Well——

Mr. COTA. In fact——

Mr. ROUSSELOT. You see, you've left the impression that nobody would listen to you.

Mr. COTA. Well Ed——

Mr. ROUSSELOT. Ed Edelman gave you a hearing?

Mr. COTA. Well let's put it this way. They had hearings and we have had to fight the Selmar Juvenile Hall reconstructtion——

Mr. ROUSSELOT. Yes.

Mr. COTA [continuing]. And what happened was 3 to 2 it was voted to rebuild anyway. The majority would not listen to us and they voted to rebuild the facility——

Mr. ROUSSELOT. They did too.

Mr. COTA. But if we don't stop——

Mr. ROUSSELOT. We can't stop that now, can we?

Mr. COTA. No. But, you might be able to do this. One, have them comply with the Birch Bayh Act by saying institutions of this sort cannot be supported by Federal funds and hopefully get something done in that status. Second——

Mr. ROUSSELOT. It's built, isn't it?

Mr. COTA. Pardon me?

Mr. ROUSSELOT. It's built.

Mr. COTA. It's built but that doesn't mean you have to put up with it. We're here to talk about——

Mr. ROUSSELOT. Well, I don't understand. Do you want it deconstructed or something?

Mr. COTA. No. It's use. It should not be used for children. I don't care whether it's built or not.

Mr. CORMAN. What then? We're not at dispute with the State of California about finding of different kinds of offenders; the same as the petition. I take it the main thrust of your suggestions are that status offenders should not be in there with the criminal offenders; is that correct?

Mr. COTA. That's right. That's one of the things——

Mr. CORMAN. That one, we might be able to do something about.

Mr. COTA. For most of that it's very important because as I say this constitutes child abuse of the worst kind, putting a—you know—someone that's committed no offense in a penal institution where they have them.

Mr. CORMAN. All right.

Mr. COTA. They are under penal conditions as I've described. So, that's one very important thing.

Also, I would hope you could also try to get the powers to be to start getting away from the huge institutions like Selmar because our fight is to get them not to use that place; even if it is built—I don't care. Let them use it for a highly controlled facility or something.

But, we need urgent help in that respect because we're going to be asking for Federal funds for the worst kids. We explained to the board of supervisors, prior to the building of Selmar; they can build it and you'll find in that letter I gave you, it will be overcrowded and then what are you going to do—you'll be asking for more Federal money.

Mr. ROUSSELOT. Well, are there plans to build another facility like this with Federal funds?

Mr. COTA. There is a sequel—undercurrents have started before——

Mr. ROUSSELOT. Is there a specific facility that you know of to be built?

Mr. COTA. All I can tell you, sir, is there's the same type of undercurrent as they used prior to Selmar. And, I would hope that the Federal officials say no and we're going to see our best to make sure that Selmar is not used for children period.

You've violated a Federal act, the—and also insofar as the status offenders are concerned, I would hope to that extent you will do something about it anyhow. How else can I say it. It's hard to describe the test to get them to stop in the first place, and then we come to you and say, well I hope you'll listen to me. Maybe you'll help.

Mr. ROUSSELOT. No. You can try to get one more member of the board of supervisors to vote against it.

Mr. COTA. Well, we've got——

Mr. ROUSSELOT. I mean, it's 3 to 2. That's pretty close.

Mr. COTA. I agree with you, but we tried from 1974 to 1976 to change those——

Mr. ROUSSELOT. Well I tried to get a panel for years but now we're finally there. Try that, OK. Just keep trying. You've got Edelman on your side, and who was the other one?

Mr. COTA. The other one was Hays.

Mr. ROUSSELOT. Hays.

Mr. COTA. He's retired now.

Mr. ROUSSELOT. Yes. Miss Burke was here today. Did you talk to her?

Mr. COTA. I didn't get a chance to talk. I didn't see her.

I don't want to leave you with the impression that I'm going to give up here.

Mr. ROUSSELOT. You understand though that we're not the county board of supervisors?

Mr. COTA. Oh, I do. What I'm trying to say is I am persisting on——

Mr. ROUSSELOT. You're being persistent.

Mr. COTA. Yeah. I am. But that doesn't change the fact the Federal funds were used to build this institution, wrongfully so. They abuse it and in terms with the Federal Government, they should look into that so that it will not be done again.

And perhaps they—if they look—let's redirect the efforts being made there because it's in violation of H.R. 3434 because kids cannot visit their parents there.

Mr. ROUSSELOT. Are you saying the facility is in violation of H.R. 3434?

Mr. COTA. Sure it is. The intent shows that you want to build families——

Mr. ROUSSELOT. For all the kids that are there or just——

Mr. COTA. For the status offenders.

Mr. ROUSSELOT. Status offender.

Mr. COTA. And for the mentally disturbed kids that we have in the 96-bed facility.

Mr. ROUSSELOT. I see.

Mr. COTA. There are many aspects to it and then it gets back to the string of time. I'm sorry to be so long but one item persists that I hope you regard and that is Selma you see is a massive child abuse situation. If you'd like me to be specific——

Mr. ROUSSELOT. A massive child abuse——

Mr. COTA. Sure.

Mr. ROUSSELOT. At the Selma facility?

Mr. COTA. 2,000——

Mr. ROUSSELOT. At this facility?

Mr. COTA. Sure. It's the facility. Sure.

Mr. ROUSSELOT. Yes.

Mr. COTA. We have a 337-plus bed facility and 40 of them have their own plumbing so when they're locked in they don't have to defecate on the floor—337 of them—the better behaved kids are locked in at night and they are not allowed out—in terms of 337 all out at once. They urinate and defecate on the floor. I don't have to tell you what kind of——

Mr. ROUSSELOT. We're certainly not in favor of that.

Mr. COTA. Well, all right then. That's why I'm here. You ask me if it was massive and yes, this is massive. That explains why it's massive. There are many other aspects to it. If you'd like I can give you an illustration.

Mr. ROUSSELOT. You'd make a great Senator. You know why? Because you know how to filibuster.

Mr. COTA. Well, I don't want to filibuster. I would hope to be helpful to you.

Mr. CORMAN. Mr. Cota, I appreciate your testimony and I asked you earlier if you'd like to submit a more detailed written statement to be made a part of this record.

Mr. COTA. I don't know.

Mr. CORMAN. And I—I'm impressed with Selma for the kind of construction it has built with Federal funding and because of the

identity assistance, sort of, but that does not mean there is no affiliation to negotiate for their obeying the law.

We will try to take a look at it.

Thank you very much.

Mr. ROUSSELOT. Mr. Cota, I'd like to know one other thing. In the record you kept saying "we". Who's we?

Mr. COTA. Well originally the action that we brought, it was the Beverly Hills Bar Association, the Los Angeles County Bar Association, the National Council of Jewish News——

Mr. ROUSSELOT. And those are all the people you represent?

Mr. COTA. Well, no. They all helped on the lawsuit the time it was litigated in the court.

Mr. ROUSSELOT. When you say we, who are you referring to?

Mr. COTA. So, Im not——

Mr. ROUSSELOT. You and who else—your wife?

Mr. COTA. There were seven plaintiffs in the action.

Mr. ROUSSELOT. Seven plaintiffs?

Mr. COTA. Arnez Atach, Southern Christian Leadership Conference, Jules Brenna of the NAACP.

Mr. ROUSSELOT. I see.

Mr. COTA. They were all involved.

Mr. ROUSSELOT. They were all involved in the lawsuit. So we may take the list from your suit to understand that you're testifying on behalf of that——

Mr. COTA. No. I speak for myself today.

Mr. ROUSSELOT. You're not here——

Mr. COTA. I haven't consulted them on this.

Mr. ROUSSELOT. I just wanted to know; when you kept saying "we." I just wanted to know who it was.

Mr. CORMAN. Thank you very much.

Mr. COTA. Congressman, thank you very much.

Mr. CORMAN. The hearing stands adjourned until 9 a.m. tomorrow.

[Whereupon, at 1:50 p.m., the hearing was adjourned, to reconvene at 9 a.m., Tuesday, April 8,1980.]

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CHILD ABUSE PREVENTION AND TREATMENT PROGRAMS

TUESDAY, APRIL 8, 1980

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON PUBLIC ASSISTANT
AND UNEMPLOYMENT COMPENSATION,
COMMITTEE ON WAYS AND MEANS,
Los Angeles, Calif.

The Subcommittee on Public Assistance and Unemployment Compensation of the Committee on Ways and Means met at 9 a.m., pursuant to notice, in the Health Service Auditorium, 313 N. Figueroa, Los Angeles, Calif., Hon. James C. Corman (chairman of the subcommittee) presiding.

Mr. CORMAN. The subcommittee will resume its hearing and we're very pleased to welcome Judge Peter E. Giannini from the Los Angeles County Superior Court as our first witness. Judge.

STATEMENT OF JUDGE PETER E. GIANNINI, LOS ANGELES COUNTY SUPERIOR COURT

Judge GIANNINI. Thank you, Congressman Corman. We were commenting just before this meeting that a few years back, more years than either the Congressman or I care to admit, I was with a firm of attorneys here in Los Angeles and he was the office boy for the firm. And now the receivership is sort of reversed here this morning; I am down here looking up at him. The thing has gone full circle. I am very pleased——

Mr. CORMAN. I'm sure you're not as unnerved as those in my profession are when we sit down there and look up at those in your profession.

Judge GIANNINI. Thank you very much.

I wish to commend you very much, Congressman, you and your committee, for the excellent work that you're doing in this area. It's certainly very badly needed. I want to talk about a few things this morning that we have going here in Los Angeles with reference to our judicial system.

Now, in order to process the approximately 600 to 700 cases a month—new filings that we have coming through the dependency court, which is a name that is given for that branch of the juvenile court that specializes in child abuse cases, as you know—to handle that large volume, plus about 8,000 to 10,000 annual reviews and all of the other procedures and responsibilities that we have, we have seven separate departments; so there are seven judicial officers. Of those seven judicial officers three are judges and four are commissioners.

It's a large operation. Probably the largest court of this type in the country. As contrasted to most jurisdictions, we separate the child abuse cases in Los Angeles County from all other types of cases and they are processed separately. This has resulted in our being able to identify and deal with problems in this area and to experiment and pioneer a new program which would not be possible, or it would be much more difficult, if you had your child abuse cases mixed with the delinquency-type cases and the other type of judicial work that is being done.

In approximately 1978 we responded to a request for proposal issued by the National Center on Child Abuse and Neglect. I was the principal investigator; the draft was made; we were one of four projects that are currently implemented throughout the country. It's a dependency court demonstration project. It's a 4-year program and we're well into it now. We have a staff of 7 and approximately 50 trained, well-trained, volunteer guardian ad litem. One thing that the program is demonstrating is a very, very cost-effective means of utilizing trained citizens for work in this area. We have a special training program for them. Practically every one of our guardian ad litem has an advanced degree. They act on a purely voluntary basis and we're getting a lot of very good work from them in this area.

One of the objectives of our demonstration project: First, the training of judicial officers—you're assumed, of course, once you take the bench and you look so very austere in those robes, to have somehow metamorphized all the wisdom of the world, but that assumption is a rebuttable one and in the case of child abuse it's very rebuttable.

So, we have—twice a year we have a rather extensive training program for judicial officers and there has been such an interest in that area that we include other court-related legal personnel such as county counsel, who represent the petitioner, the DPSS and a panel counsel. We have about 15 attorneys who are picked on an hourly basis by the county to represent parents and to represent minors when there is a conflict between the county counsel who ordinarily represents the minor and the minor. The minor wants to go home; county counsel for DPSS says "No; I think you ought to be placed somewhere," and then we appoint a family counsel.

So all of those—that personnel participates in this program as well as our guardian ad litem. There's quite a group and now other judges and personnel throughout the State have been advised of the program and they intend to participate.

Second, a hiatus exists. Another area of need that was identified was that of coordination between the dependency court and the adult criminal court in areas where there are adult criminal prosecutions pending. In many instances the parents will come in or the offending party will be in lockup because he or she is being charged with child abuse in the adult criminal court. There has been no coordination, virtually no coordination between the systems in the past, believe it or not, even though we're housed in the same building, most of us—that is where most of the criminal courts are.

Another area in that direction is the enforcement of section 1048 of the California Penal Code which says in essence that cases in criminal court where there's an abused child are entitled to priority over all other cases and must go to trial in any event within 30 days unless good

cause is shown, and we've had some horror stories. I don't have time this morning to recite any of these horror stories: I'm sure you've heard some of them as a result of delay in the adult criminal procedures.

This is particularly true in sexual abuse cases where delay occurs, frequently, intentionally in order to harass the minor victims and get the victim to change his story. So, if you can get those cases to trial—the sooner the family will be engaged in trial suit, the sooner the family will be engaged in a treatment program and the less trauma there is to the minor.

The third area here is frequently there is harassment of the minors in the hallways of the preliminary hearing, attempts to make a change in testimony. So these guardian ad litem accompany these minors throughout the whole system. It's never been done before—in this country, in any event.

Other goals, general guardianship, coordination between the probate department and the juvenile court department where general guardianship is desired. Sometimes, for various reasons a situation calls for a guardian rather than adoption. That is usually the case where the child is in the home of a relative, an aunt. The aunt wishes to have a permanent hold on that child and should have a permanent hold from the standpoint of the best interest of the minor but does not wish to terminate parental rights because the mother does come around once in a while and visit. That's a typical guardianship type of case.

And frequently those people do not have the financial means to take out the guardianship papers so our guardian ad litem tries to address that need.

ADOPTIONS

In Los Angeles, very briefly approximately 5 years ago, maybe it's 8 years, as time goes by now there was adopted a policy in a program called operation outreach. That was at the time when as a result of the appeal, abortions and so on and so forth and the fact that mothers are keeping their babies, the supply of babies for adoption, new babies just dwindled.

We have three homes in Los Angeles County, Florence Crittenton, Booth Home and St. Ann's where their populations are way down. They're looking for other programs. They specialize in this area because of—well, operation outreach was a program whereby the department of public social services in cooperation with the department of adoptions scoured their files and entered into a particular program whereby minors who fell within the terms of the California termination of parental statute which is section 232 of the civil code were referred from our courts, the dependency court to the adoptions department for receipting to terminate parental rights and we have vigorously followed that since then. I have personally handled all those referrals because I found there's slippages on the way; some social workers feel, well, this mother has a drug problem, maybe it has been 3 to 5 years but I think she's going to make it now. In the meantime the child's getting to be about 5 or 6 years of age and she doesn't make it and the child ends up drifting in placement so you have to watch that very carefully.

I personally process about 50 cases a month. They come in on a nonappearance basis. I handed Mr. Jensen a copy of our superior

court policy memorandum. It sets forth the procedures that we've adopted for making these referrals to the county department of adoptions.

All right. So that's pretty much the status of that. Our guardian ad litem project addresses itself to the needs in that area, particularly minors who've been referred for adoption. Some of them have been adopted and the adoption proceedings have been set aside and vacated. Those are some of the most pitiful cases because the adoptive parents simply can't tolerate the minor and then where does the minor go from there. So, there are needs in that direction which we are also addressing.

I wish to allude very briefly to a—what I feel is a rather significant memorandum, a copy of which I also handed to Mr. Jensen concerning the financial aspects. I know that you're going to have other testimony in this area but the—this—it was important for us as a project to be able to advise a person as to whether or not they should go in the direction of guardianship or adoption and there are financial considerations. Many cases you know where a minor has been placed with a foster parent or a relative, they would like to adopt the child but there are heavy financial considerations to take into consideration.

If the minor, for example, is with foster care and is receiving BHI payments, you will see on the first page here the rates they are receiving.

Now, if you turn over to the fourth, and those rates vary from $185 to $282 a month. An AAC grant, if the child is adopted under the "Aid for Adopted Children," under the existing law that would be reduced from $165 a month to $126 and the program terminates. It's only, as you know, an 18-month term program and it terminates at the most at the end of 5 years. I understand that your bill here addresses that problem, hopefully because it's a disincentive—it's a disincentive for persons who are acting as foster parents to adopt children because as the law now reads their payments to them would be substantially reduced.

I wish very briefly to address you to a case, if I may. You may also be familiar with and that is the case of *Miller* v. *Yokum;* a Supreme Court case decided on February 22, 1979. That case held that it was unconstitutional for the social service system to discriminate and make BHI payments to nonrelated caretakers as contrasted to a relative. It was discriminatory against a relative and where do we stand. That required a great deal of financial implementation. Where do we stand on that score at this particular time in Los Angeles County? The decision has never been implemented. We keep hammering away at it but it has not been implemented and in this county currently there are 13,000 AFDC children living with adult relatives other than their parents.

Under the court decision additional aid cost to the county would amount to $1.4 million a year. However, this assumes the continuation of the State buyout of 95 percent of the non-Federal AFDC/BHI costs. If the State buyout is not continued, additional county costs would rise to $19 million annually.

It's a problem that has to be addressed. It can't be swept under the rug. The Supreme Court says that relatives who have minors are entitled to BHI payments. Right now they get only AFDC which is

at a considerably lower rate and we have these cases come in before me and as a judge I am almost helpless to do something about it. I suppose I could order the county to make payment. You try to handle these things on an administrative level if you can. If you can't, then you take more drastic action.

I'm watching my time here. I believe I'm out of time actually.

Mr. CORMAN. Judge, you can take all the time you need. This is very helpful to us.

Judge GIANNINI. Well, it's dangerous to tell somebody that.

Mr. CORMAN. We sit at the other end of the line and try to figure out how we might be helpful. But, you're sitting there on the front line looking them in the eye as you decide.

Judge GIANNINI. Well, thank you very much.

I've been in this business for 5 years. I probably specialized longer in dependency court action than certainly any judge in California specializing in this area here and so I do have quite a background in the area and I'm very willing, anxious, indeed, to share with you.

Other areas very briefly—and that also is a dangerous phrase to use—that the project addressed is a special litigation need. Minors who for example whose parents have been killed in a—are dependents of the courts—have been killed in an automobile accident and maybe they'll have a wrongful death claim or other legal needs, every variety of State and so forth and they're frequently—those needs are—can be completely lost either through—either through neglect or there's just no one to take the responsibility or because the caretaker is not a person that you can trust and they make off with the money. They don't have anything and so this is an area also that our guardian ad litem program is addressing.

Streamlining judicial processes is an ongoing thing. Trying to do whatever we can to minimize traumatization of minors through the judicial system itself.

For example, we don't—a young minor in a sexual abuse case—we don't have that minor take the stand and testify in the presence of the parent. It's traumatic. Or the caretaker—whoever the caretaker might be. We actually order the testimony be taken in chambers; parents are advised that they have the right immediately after that to have the testimony read back to them for any further proceedings and in most cases, they don't do that. They waive that right. In most cases they know pretty well what the child is going to say but this avoids one area of trauma.

We're also working on other possibilities so far as avoiding a trauma through the judicial system as much as possible. In this area it is estimated that by the time—when there's an adult criminal prosecution pending by the time the case gets to—is completed in both systems, the juvenile and the adult criminal system there's approximately 21 interviews with that minor, of going over the same story. You can be sure that that is not helpful from the standpoint of the mental health of the minor.

I wish to state also that I've handed to Mr. Jensen some of these pamphlets that we have on our guardian ad litem program. I know your bill also is interested in annual review procedures.

These are extremely important. You just have to continually watch the system. You have to. We have a good social system—service sys-

tem in Los Angeles County but just as those of us on the bench vary in our quality, our diligence, our capacity, the same thing is true of all areas of human endeavor. And in order to get uniformity and prevent children from being lost in placement, to insure that either they go home or else they're placed for adoption within a reasonable period of time and mandatory review is required and we have a mandatory review statute every year as an appearance review required at least once a year; and we have a number of other additional review procedures which are discretionary in most cases with the hearing officer.

I'd like to state that as I perceive the system, looking back, Congressman, I feel that there are two areas that need to be addressed particularly by legislation. One is the problem that we have with what was termed the status offenders. These are minors who are usually in their teens, sometimes younger than that who are acting out type youngsters but who are not yet heavily criminally oriented or they may just be runaways. Usually the minor of that type is both acting out and a runaway and frequently engaged in minor criminal activities; some drug usage—just a teenager who is really acting out and out of control.

Our present system results in a large number of these minors being housed in this county and elsewhere with the minors who are strictly abused children; who have been physically abused or sexually abused or have just drifted and I strongly believe from what I've seen that those two populations should be segregated.

The problems that we have at MacLaren Hall here stem a great deal from this problem. The resources of staff throughout the system have to be heavily weighted in favor of this type of a youngster because they require a lot of resources just as it would a parent who has a child who's really acting up. Well, that just absorbs all of your time and energy.

This results in a relative paucity of resources to deal with these abused children. And not only that, but even worse than that, this type of a minor will intimidate children so that we've had cases for example in which, in sexual abuse cases, the minors will blow the whistle on the offending caretaker and find themselves actually the incarcerated victim in MacLaren Hall and foster homes and so forth and after a period of time they want to change their story because as bad as things were at home, they'd rather be home and be subjected to that than be subjected to intimidation and so on by the—by the so-called status offender type minors who are housed in the same facility.

This is, I think a very critical problem. We've had a lot of legislation and attention in the past to deinstitutionalize "the status offenders" or segregating them from the minors who are involved in criminal activities.

And, whether that is good or bad that segregation was made but as a result of that now we have particularly through our voluntary placement program, whereby parents will come in and voluntarily place minors, 75 percent of those kids are status offenders of that type. They are acting out minors. They come into the system; they get into MacLaren Hall and it's very difficult to place them because no one wants them. Foster parents don't want them because they'll run or act up and come back again and so they occupy a large percentage of the population and they get stuck at MacLaren Hall.

And then when you get an abused child coming in, you have that population. That's a serious problem.

The second area that I feel needs to be addressed, and I believe your bill does address it, in some areas although I haven't read the bill completely. The copy that I have here is in such fine print that as my eyes get older I can use that as an excuse.

Mr. CORMAN. I remember they're not that old, Judge.

Judge GIANNINI. Thank you.

Well, your memory is not geting any younger either.

Well, now, OK. The second area that is the need for support services, particularly in this county; that is support services to prevent the removal of children from the home.

All right. If you don't have the caretakers or such service, if you don't have a crisis intervention here, if you don't have the various types of services available so that a child can be left safely in the home, you have no alternative except to remove the child. And as a result you have too many children being placed and, looking at a case that comes before us, we have no choice because what can you do? That child has to be protected, whereas if these various services that exist can be utilized initially I believe—I'm convinced—that we could keep a lot of these children out of the foster home system.

Now we do have in San Mateo County a State-funded demonstration project and that project has two goals—it's been operational now for about 3 years—one of which is the use of funds for preventive type of services. I say preventive in the sense of trying to keep the children out of placement.

You may be familiar with that project. Judge Frank Piomdo up here, of San Mateo County, is very much involved and it's a program that you should be familiar with because I think it has a lot of merit to it. There are some things about it that I don't agree with; there are some things that you have to be very, very careful with, but generally speaking it does have a—it is a step in the right direction. It's only on an experimental basis at this time but if there were a shift in resources, I would have to suggest it be a resources—if you have to shift resources and you cannot come up with additional resources because of funding strictures, I would suggest serious consideration be given to a program where the social service systems do have these additional resources available for prevention of placement. And we just don't do it here in this county. There's just too many children being placed because of that.

Thank you very much.

Mr. CORMAN. Judge, let me ask you on that last point. We always have problems at the Federal level. Most of the things we do are directed toward people who are in varied degrees of poverty and once you get above that poverty level we sort of take them out of the system.

We've made some modest headway with title XX money, saying it would be available for everybody and, in some instances, on a fee basis.

Let's take the family that's making $25,000 a year and may need some rather expensive social services, psychological, psychiatric help. Would it make some sense to try rebate fees based on income and let the Government pick up the balance of that?

Judge GIANNINI. Well, my response to that is yes. Definitely yes. Otherwise, you're going to have an important population that cannot be served. That family may not be impoverished from the subsistence level but may be impoverished from the standpoint of being able to give the—have the resources that that child needs. It makes no difference to the child whether the poverty comes from one level or the other.

Mr. CORMAN. Mr. Jensen?

Mr. JENSEN. Thank you.

One of the questions that is dealt with in the bill I've heard you address before, and that was making that fine-line distinction between when the judge determines sufficient services had been provided to prevent the need for removal of the child from the home; exactly how do you make that judgment—whether preventive services can prevent that removal of the child from home. Can you comment on that?

Judge GIANNINI. Well it's hard to comment in a way that would be helpful. In other words to set up some type of guidelines for the exercise of a judgment in that area.

Of course, No. 1, we are handicapped in that we have simply no resources available to prevent a child from being removed from the home. There are some resources but pretty limited; I'd say no. OK; there's Parents Anonymous, there's that type of psychological, parental educational program and so on and so forth and a drug abuse program, et cetera. There are those and if those are available and you feel there's a good shot at it from the standpoint of the parent's motivation, you may give it a try.

From the standpoint of in-home services such as you could need in a filthy home situation and many other cases, to be there to help that mother—well, we have nothing like that, so we're limited.

I think it's very difficult to set up guidelines on that score because every case is different. It doesn't help to say that, but it is. You may have a family with a long history of a drug abuse, of therapy programs and nothing has worked and so on and here they are at the end of the road; and on the other hand you have a young mother who's going out on a drug bust and so on and really comes in, impresses you as being motivated and so you order her to go to a drug program. You might give that a try; so it varies. It's a kaleidoscopic variation in the individuals and the histories involved.

Mr. CORMAN. Mrs. Phillips?

Mrs. PHILLIPS. You mentioned that you're vigorously pursuing referral of children whose parents have had their rights terminated so that the children can be put up for adoption.

Yesterday we heard from a woman who had lost three children to adoption and was looking for them and cannot find them, so I have really two questions. No. 1, what are the parental rights in the adoption process? Do the parents have a chance to present their case? And, No. 2, is there anything possible in the area of setting up adoptions where the natural parents do continue to have some, if not right of visitation, at least some notification that the child is doing well and is in a comfortable and wholesome setting?

Judge Giannini. OK. In answer to your first question, Mrs. Phillips, the terminating parents' rights obviously is a very very serious procedure and parents who have children who are dependents of the

court—first, before we refer to the count department of adoptions the procedure that is set forth, and Mr. Jensen has there, there's a whole laundry list of guidelines that we follow, before we'll even refer.

In other words, have services been offered to the parents? What are the services that have been offered to the parents? What did they respond to the services? How long a period of time has there been that the child has been in placement? There's about 8 or 10 various items set forth.

Then assuming that we feel that the child does fall within the provisions, there's six catgories under civil code section 232 for terminating parent rights: Abandonment for example, physical abuse with a child out of the home for a year, drug abuse, alcoholic abuse, et cetera. There's six categories.

If the child falls within any of those six categories then the child will be referred, assuming that the other conditions in that laundry list are complied with.

Then the most is given notice and an opportunity to be heard, represented by counsel and the full panoply of due process whereby she can test if she wishes the proceedings to terminate her parental rights.

We have one department here that does nothing but hear those cases all day, every day. I sat in that department. I've sat both in—and it's department 44—in that department as well as the other so the parent is given full due process.

Mrs. PHILLIPS. Currently is that true also for a parent who would be in jail perhaps on charges of neglect or abuse?

Judge GIANNINI. Absolutely. It doesn't make any difference. OK. Now so far as what—ongoing rights after adoption are concerned—that's a real difficult and complex situation.

From what I have seen, it would appear to me that if the situation is one that it appears there should be some continuing parental involvement that normally a guardianship proceeding will—would be more suitable than the adoption proceeding.

But, let's take a case where the mother really wants to continue to be involved with the child but doesn't really want to have the responsibility or really doesn't want to give this up but doesn't want to assume the responsibility.

In most of the cases that we see in department 230 or department 44, the judge is wondering why the petition wasn't filed long before it was actually.

So, it's possible that procedures could be set up to provide a notification, a notification sheet could be given but I think it's extremely important—extremely important that the identity of the—between the natural parents and the adoptive parents remain anonymous and not disclosed.

I do not have a great deal of sympathy for the attempts being made to break down the system. OK. Let me give you an example. You have a girl who had a child at Booth Memorial Home. She's made a mistake. OK. She's gotten pregnant and she's had this child. The child is placed out for adoption. Then she marries and doesn't tell her husband and she had this unfortunate incident. She's about 30 years of age and she has three children by her husband, comes to the door and this young person says "I'm looking for my mother." You know. I just—I think that's grossly unfair to the mother. Really. I can't

argue strongly enough at all in favor of those who are breaking down the system that we've had.

Mr. CORMAN. Judge, thank you very much. You've been extremely helpful.

Judge GIANNINI. Thank you.

[Attachments to the statement follow:]

THE GUARDIAN AD LITEM DEPENDENCY COURT IMPROVEMENT PROJECT

directed by

SUPERIOR COURT OF THE
COUNTY OF LOS ANGELES
STATE OF CALIFORNIA

sponsored by

NATIONAL CENTER ON
CHILD ABUSE AND NEGLECT
WASHINGTON D.C.

64-900 O - 80 - 9

The Superior Court of Los Angeles directs a demonstration grant project entitled the Guardian Ad Litem/Dependency Court Improvement Project. Operating out of the juvenile court, dependency section, this project is designed to demonstrate improved methods of handling child abuse and neglect court cases. It is a court project. All of the activities and results are directed at providing feedback to the court for use in judicial decision making and improvement of court processes.

FUNDING

This grant was awarded to the Superior Court by the National Center on Child Abuse and Neglect, U.S. Children's Bureau, Department of Health, Education and Welfare (HEW Grant #90-C-1691). The initial grant award is for two years with the anticipation of an additional two years funding.

ADMINISTRATION

The project is under Superior Court administration and has the advantages of all of the court's administrative services. A professional staff implements this project's objectives under the supervision of a project manager and with the direction and guidance of a juvenile court judge, 20 percent of whose time is donated as the project director. The judge, project manager and judicial officers select and work with an advisory committee comprised of community and court system representatives.

OBJECTIVES

The efforts of this project are directed at improvements that the court itself may make in the handling of cases. Included in its objectives:

- To increase the court's effectiveness and minimize trauma for children in judicial proceedings through improvement of court processes and coordination with other departments of the court; i.e., adult criminal, adoptions, probate, and domestic relations.

- To increase knowledge regarding the capability of the juvenile court to address broader concerns in child abuse and neglect.

- To demonstrate a useful system of feedback for improved judicial decision making.

- To demonstrate methods of providing counsel for parties and counsel or guardians ad litem to protect the interests of children in court proceedings.

METHOD

Primary to the achievement of these objectives is the project's use of citizen volunteers who are appointed as guardians ad litem. A guardian ad litem is an officer of the court who must speak to the individual needs or "best interests" of the child and provide the court with a written recommendation.

There are two ways in which the information gained through the use of the guardians ad litem will be used by the court for judicial decision making and the improvement of court processes. In the first instance, the court will use this information to render decisions in individual cases. Secondly, the knowledge gained through this experience will then be used to improve court processes related to particular groups or types of cases.

It is believed that the views of well-trained, concerned volunteers teamed with the professional expertise of the court system representatives provide a valuable means for the court to improve its handling of child abuse and neglect cases.

JUVENILE COURT JUDICIAL MANUAL: PROCEDURES AND GUIDELINES

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9-20-79	2
Approved: Presiding Judge	

REFERRAL OF DEPENDENT CHILDREN TO COUNTY DEPARTMENT OF ADOPTIONS

NOTES AND REFERENCES

I. Introduction

This section sets forth the policy of the Juvenile Court concerning the referral of dependent children of the court to the County Department of Adoptions (CDA) for adoptive planning and the initiation of CC §232 proceedings to have the minor declared free from the custody and control of his parents.

II. Adoption Referral Policy

A. The adoption referral policy of the Juvenile Court is:

1. At any disposition hearing where the custody of a minor is removed from his parents and at any later hearing where it is deemed advisable by the court, the court shall advise the parents of the objectives of the juvenile court, as stated in WIC §202, the existance of CC §232, and the possibility of a referral to CDA for adoptive planning and the initiation of CC §232 proceedings to have the minor declared free from the custody and control of his parents.

   The parents present at the hearing should be so advised, both orally and in writing. The oral statement should be brief and non-threatening and direct the parents' attention to the written statement. The written statement should be more detailed and in English and Spanish and a copy should be personally given to each parent present at the hearings.

   A copy of the written statement should be mailed by the clerk to each parent who is not personally present at the hearing, unless the whereabouts of such parent is unknown.

   The minute order should reflect that the advisements have been given.

2. DPSS shall review each case from time to time, but at least before the disposition hearing and before each annual review hearing, to determine if there is sufficient cause to believe that the minor comes within any of the provisions of CC §232.

3. If the minor is not within any of the provisions of CC §232 and it does not appear likely that the minor will come within such provisions, this should be reported to the court in the court report for the next appearance hearing.

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Referral of Dependent Children to County Department of Adoptions continued . . .

4. If the minor is not within the provisions of CC §232 but it appears likely that he will come within such provisions, this should be reported to the court in the court report for the next appearance hearing.

5. If at any time it appears that the minor comes within the provisions of CC §232, DPSS shall confer with CDA to consider the potential of the minor for adoption. The following factors should be considered:

   a. Is there sufficient cause to believe that the minor comes within the provisions of one or more of the subdivisions of CC §232?

   b. Has DPSS made reasonable efforts to carry out the objectives of the juvenile court, as provided in WIC §202, and to offer and provide the parents with the child protective services delineated in WIC §§16500 to 16511?

   c. Has DPSS made reasonable efforts to place the minor with members of his extended family?

   d. If the referral is made to CDA and the minor if freed for adoption, is there a reasonable expectation that the minor will be adopted?

   e. What is the preference of the minor, if he is old enough to express an intelligent preference?

   f. Will the minor consent to the adoption, if his consent is required?

   g. Does DPSS believe that the minor should be referred to CDA?

   h. Will CDA accept the referral, if made?

6. If DPSS and CDA agree that the minor is not a likely candidate for adoption and should not be referred to CDA, that decision and the facts upon which it is based should be reported to the court in the court report for the next appearance hearing.

7. If DPSS and CDA agree that the minor is a likely candidate for adoption and should be referred to CDA, that determination and the facts upon which it is based shall be reported to the court in the court report and DPSS shall recommend that the court authorize DPSS to make the referral.

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NOTES AND REFERENCES

Referral of Dependent Children to County Department of Adoptions continued . . .

The court report shall contain:

a. The usual information contained in an annual review court report.

b. Information concerning each of the factors required to be considered by DPSS and CDA, as set out in Paragraph 5 of this policy statement.

c. A recommendation concerning visitation by the parents pending completion of CC §232 proceedings.

8. The court will normally act upon the DPSS recommendation on a nonappearance basis. However, if the court intends to impose a more restrictive visitation order than the order then in effect, or if the court believes it to be appropriate for any other reason, the court shall set the matter for an appearance hearing and DPSS shall give due notice thereof to all persons entitled thereto.

9. If the matter is set for an appearance hearing, the court may limit the issues to be heard to the issue of visitation or such other issues as the court, in its discretion, deems relevant to a proper determination of the matter. The minor shall not be present at the hearing unless his presence is ordered by the court. If the parents contest the recommendation and request that the minor be present at the hearing, the court will order DPSS to bring him to the hearing: provided, however, that if it would be detrimental to the minor for him to be present at the hearing, the court shall make every effort to obtain his testimony by alternative means, such as by deposition or video tape.

10. In acting upon the DPSS recommendation, the court shall consider the court report and all relevant factors including, but not limited to, the factors set out in paragraph 5 above.

11. The court may authorize the referral, if appropriate, or refuse to authorize it, if the court determines that it would not be in the best interests of the minor to authorize it, or defer ruling upon it, if the court determines that additional time would enable the objectives of the juvenile court to be accomplished.

12. If the court authorizes the referral, the court shall make an order concerning visitation pending completion of the CC §232 proceedings. Such order may be modified later by the court hearing the CC §232 action pending completion of that action.

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Referral of Dependent Children to County Department of Adoptions continued . . .

13. If the court authorizes the referral, DPSS will continue to control the supervision of the minor and be responsible to the juvenile court therefor.

14. If the referral is made and a CC §232 petition filed thereafter, CDA will cause a Notice of Filing of CC §232 Action to be filed with the juvenile court within one week after the CC §232 action is filed. Further, if the court hearing the CC §232 action modifies the visitation order made by the juvenile court at the time the case was referred, CDA will cause a Notice of Modification of Court Order re Visitation to be filed with the juvenile court within one week after such order modifying visitation is made.

15. If the parents relinquish the minor for adoption, either before or after a CC §232 action is filed, DPSS shall submit a nonappearance report to the juvenile court advising it of the relinquishment and recommending termination of jurisdiction. The report may be submitted at any time after the relinquishment has been filed with the State Department of Health.

16. If a CC §232 petition is filed, heard and granted, and the minor is freed from the control of his parents, DPSS shall submit a nonappearance report to the juvenile court advising it of this action and recommending termination of jurisdiction. If it appears that there is a strong possibility that the CC §232 judgment will be appealed, the report requesting termination shall not be submitted until the CC §232 judgment has become final. (The judgment becomes final where a notice of appeal is not filed within 60 days after the date the clerk mails notice of entry of judgment pursuant to CCP §664.5 or within 60 days after the date of service of written notice of entry of judgment by any party upon the party filing the notice of appeal.)

17. The court will normally act upon the recommendation to terminate jurisdiction on a nonappearance basis. However, if the court believes it to be appropriate it may set the matter for an appearance hearing. It should be noted that if the procedure set out in this policy statement have been followed, it is the policy of the court to terminate juvenile court jurisdiction after the minor has been freed from the custody and control of his parents unless highly unusual circumstances exist that clearly warrant continued jurisdiction.

18. If CDA discontinues providing services for the minor, either without a CC §232 petition having been filed or after the denial or dismissal of

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a CC §232 petition, DPSS will promptly submit a court report to the juvenile court advising it of this action. The next scheduled appearance hearing shall be advanced for this purpose and notice shall be served on all parties as required by law. The court report should contain the usual information contained in an annual review court report *plus:*

a. An explanation of why CDA discontinued services; and

b. A case plan as to the future handling of the case, including a recommendation concerning future visitation by the parents.

B. The policy statement set forth above restates the policy originally adopted by the Juvenile Court effective March 1, 1978 and amended effective September 1, 1977.

LOS ANGELES COUNTY LETTERGRAM

TO	FROM
JUDGE PETER E. GIANNINI PROJECT DIRECTOR	ZAIDA RAMOS PROGRAM SPECIALIST

Subject: FINANCIAL CONSIDERATIONS IN REGARD TO FOSTER CARE, LEGAL GUARDIANSHIP, AND SUBSIDIZED ADOPTION

Date: 1/30/80 No.

This report is in response to your request for information on financial considerations in regard to aided, dependent minors and foster care, legal guardianship, and subsidized adoption.

FOSTER CARE

Dependent children who are in foster care placements receiving standard AFDC/BHI would receive the following financial assistance:

TABLE I

AFDC/BHI Payments

Age of Minor	Rate	Basic BHI Rate per Month
0 - 4 yrs.	B1	$185
5 - 8 yrs.	B2	214
9 - 11 yrs.	B3	236
12 - 14 yrs.	B4	257
15 plus	B5	282

Please note that payments for children in AFDC/BHI placement vary in the extreme from dollar amounts below $100 per month to some which exceed $1,000 per month. The reason for this wide variation is that some AFDC/BHI children have mental or physical disabilities or illnesses which warrant increased expenditures for professional care.

Historically, Los Angeles County has had two standards for financial assistance of minors depending on whether they were in placement with related or non-related adults.

ELIGIBILITY FOR AFDC/BHI

To be eligible for AFDC/BHI, a child had to be receiving care from other than his or her relative. The child also had to meet all the AFDC eligibility requirements applicable to a child in a foster care setting, including residence, age, property, etc. (For further information on standards of assistance, please refer to DBP-Manual-EAS.)

ELIGIBILITY FOR AFDC-FG-U

On the other hand, it is my understanding that a child placed with relatives does not normally receive financial assistance unless he is termed "needy person" and has an income less than the amount of the AFDC basic standard plus special need. The related family the child is placed with must also meet the criteria of net income less than the amount of the AFDC basic standard. These family groups receive AFDC-FG. Unemployed families receive AFDC-U.

According to the DPSS Research and Statistical Services Section, March 1979, the estimated grant expenditures for AFDC-FG/U children living with relatives other than parents in Los Angeles County is as follows:

TABLE II

AFDC-FG Payments

Budgeted/Estimate	AFDC-FG	AFDC-U
Cost per case	$131.06	$434.13
Persons per case	2.9089	4.5615
Cost per person	$107.62	$ 95.17

Please note that these figures are budgeted estimates and actual figures may vary. In comparing Table I and Table II, the differential standards of financial assistance based on whether a child is in placement in a non-related foster home or with relatives are evident. In many instances these differing standards may mean a dependent child is placed with strangers because the minimal financial assistance granted under AFDC-FG or -U is insufficient to maintain a child.

BHI PAYMENTS TO RELATIVES

It is possible that the discrepancies in non-related versus related caretakers may soon not exist. Recently the United States Supreme Court promulgated its decision in the case of Miller v. Youakim _____U.S. _____ [_____L. Ed. 2d _____, _____S. Ct. _____; 47 L.W. 4185] (February 22, 1979.)

In essence the Supreme Court held that if a child is placed with a relative, that relative is entitled to be paid BHI payments. The Youakim case was followed by the 9th Circuit Court of Appeal in Jones v. Davis U.S.C.A. 9th No. 77-2254 dtd. April 10, 1979 _____ F 2d _____.[3]

It has been almost one year since the Youakim Supreme Court decision, but according to a guardian ad litem case, children living with relatives are still receiving differential assistance. At this writing, I do not know whether Los Angeles County DPSS intends to comply with the Supreme Court decision. What is known is that it is studying the financial impact of making BHI payments to relatives. Currently there are 13,000 AFDC-FG-U children in the County living with adult relatives other than their parents. Under the court decision, additional aid costs to the County would amount to $1.4 million a year. However, this assumes the continuation of the State buy-out of 95% of non-federal AFDC/BHI costs. If the state buy-out is not continued, additional County costs could rise to $19 million annually.[4]

SUMMARY

The court, I believe, should look beyond the financial impact of BHI aid to relatives and consider that if the court's primary goal in dealing with abused and neglected dependent children is to reunite the family, their secondary goal should be to place the child with relatives and to adequately provide that family with finances to support the child. One may assume that a child placed with relatives would be less traumatized with the out-of-home placement and, therefore, might adjust better emotionally. The reciprocal blood relationship and emotional bonds between the child and his relative adult caretaker would foster increased permanency in the child's life. The child would be more likely to remain in the relative's home rather than being shifted from one foster home to another, as is often the case. We may assume that the relative feels a larger responsibility to care for the child, but it does not follow that the relative should be responsible for financially maintaining a related child outside of his/her own nuclear family.

The effect that BHI payments to relatives may have is that:

A child may have decreased out-of-home placements and that a child may better adjust emotionally and socially. Both

speculations would save the County money in time, supervision and professional care expenditures.

In cases where a child is unable to return to his natural parents, relative caretakers may wish to adopt the child, thereby offering permanency to the child and assuming full financial responsibility. But this should be a choice the relative adult caretaker makes and not an imposition by the County.

The dependency courts have a responsibility to keep abreast of the BHI relative vs. non-relative differential payment issue. We know that the Supreme Court has ruled that relatives should be paid BHI rates, but what action has DPSS administration taken? Let us assume that the dependency courts have an obligation to inquire and to demand that the Supreme Court decision be complied with. What would happen? Are individual complaints being referred to DPSS fair hearing procedures? If so, with what results, since they are limited to DPSS administrative policy. Is that then a circular referral? How many relative caretakers have not been satisfied by the fair hearing procedure and taken the matter to the Superior Court on mandate?

Is DPSS administration planning on complying overall or with stipulations and what is their plan? I believe the court should be kept informed, and take an active role in overseeing its implementation.

LEGAL GUARDIANSHIP

If foster parents or relative caretakers assume legal guardianship of the child, the guardianship itself does not change their continued eligibility to receive either AFDC/BHI or AFDC/FG-U.

SUBSIDIZED ADOPTION

Aid for Adoption of Children (AAC) permits families to consider adoption before they are financially ready to assume full responsibility for an additional member of the family.

The amount and length of time AAC is granted to adoptive families varies and depends on the individual family and

the child's needs. Families may be eligible for AAC for:

1) Basic maintenance of the child;

2) The child's special services needs which are not met by other available resources.

The family's financial eligibility is based on their gross income plus total family members, including the adopted child(ren). The income scale in older for the family to receive an AAC grant is as follows:

TABLE III

Moderate Standard Income Scale

Family Size	Income Yearly	Income Monthly
2	$11,841	937
3	14,441	1, 03
4	17,041	1,420
5	19,641	1,637
6	22,241	1,853

(Allow $2,600 for each additional family member.)

The following schedule allows a grant to cover a child's basic food and clothing needs:

TABLE IV

AAC - Basic Maintenance

Age of Adopted Child	AAC Grant
0 - 5 yrs.	$ 65
6 - 10 yrs.	85
11 - 15 yrs.	105
16 - 18 yrs.	126

A Special Services Needs grant may be given ir addition to a basic maintenance grant. The SSN grant covers costs for treatment of any physical or emotional condition which existed and was identified prior to the adoption being finalized and which is not being met by other resources.

MediCal coverage may also be available for a child's severe medical and emotional problems which were identified prior to placement.

The maximum AAC grant is BHI rates minus 12%.

Basic BHI Rate	Minus 12% - AAC Maximum
$185	$163
214	188
236	208
257	226
282	248

Duration of Grant

The initial grant usually does not exceed 18 months, but may be as long as three years. Extensions beyond three years are made for one year up to a maximum of two years. The grant does not exceed five years.

Children Eligible for AAC

Children eligible for AAC are children legally free for adoption who would remain in foster care because they are hard to place due to one or more of the following factors:

a) race, ethnic, color, language;
b) physical, mental, emotional, or medical handicap;
c) age three or older;
d) sibling-group placement.[8]

The question remains whether there are dependent children who are not being adopted because the potential adoptive family does not meet the criteria of financially meeting their own needs or the ability to assume full financial responsibility for the minor. Do dependent children placed with relatives who receive AFDC-FG-U have less of a chance of being adopted by that family?

FOOTNOTES

1. Bureau of Special Operations, AFDC-BHI Rates to Children Currently Living With Adult Relatives Other Than Their Parents. P. 3, March 26, 1979.
2. Ibid.
3. Martin Weekes' memo, BHI Payments to Relatives, July 6, 1979.
4. Bureau of Special Operations, P. 1.
5. Department of Adoptions, Addendum I, Aid for Adoption of Children (AAC.) No. 6-22, Revised November 1979, P. 1 - 18.
6. Ibid.
7. Ibid.
8. Ibid.

Mr. CORMAN. All right. Next; the panel is Freda Hinsche, James Kent, Helen Kleinberg, Marilyn Brainard, and Lynda Daymon.

Do we have additional staff from Cedar House?

Ms. HINSCHE. Yes.

STATEMENT OF FREDA HINSCHE, ADMINISTRATOR, CEDAR HOUSE, ICAN NEIGHBORHOOD FAMILY STRESS CENTER

Ms. HINSCHE. My name is Freda Hinsche and I'm the present administrator of Cedar House which is a child abuse treatment center in Long Beach.

I've been with Cedar House only a short time, less than 1 year and I've brought with me two women who have been with Cedar House for the 5 years since it was founded.

Miss Bobbi Kendig is the adult therapist and has been involved with the program since the beginning. She's one of the founders. Marilyn Johnson is the crisis counselor who lives at Cedar House and is on call 24 hours a day who has also been with Cedar House for 5 years and I would like to ask that they sit in my place.

Mr. CORMAN. All right. We'll hear from Cedar House first then.

Ms. HINSCHE. Thank you.

BOBBI KENDIG, ADULT THERAPIST, CEDAR HOUSE

Ms. KENDIG. I am Bobbi Kendig. Marilyn also is here. Our usual spokesman, Clara Lowry, is in Taiwan, so here we are.

Mr. CORMAN. Excuse me, would you please pull the mike a little closer? Thank you. You may proceed.

Ms. KENDIG. I was thinking of what I could speak to today that might be of interest to you from our own experience. We are quite a small community-based organization. We've never had Federal funding or anything of that sort.

And, it's been a struggle from the beginning just to stay in existence but it's been a very exciting program.

Basically, we started with certain premises in wanting to start a program of this kind. One, we felt very strongly that parents essentially do not want to hurt their children. And one way this affects what we do in the program—it makes it very easy, when we have that basic belief inside us, to go to the families when we hear that a child is getting hurt.

Our approach is that we know that when somebody in the family is getting hurt, the whole family is hurting, not just the child. We have yet to be turned away in knocking on the door.

We are aware that in a moment of rage—and rage by definition is a desire to hurt or destroy—there is a feeling that I have to strike out at somebody. It is frequently the child who gets it.

But, in the times when the parent is not enraged they want to be able to feel that they can do a good job with their children. And, when we come with that conviction, it makes it very easy to approach them.

Another basic premise—basic belief—that we have is that people have within them the answers to their own problems. Now this doesn't mean that they always come around to find a good way. We have had parents that have come to the conclusion that "I can't do it." and who

have relinquished their children for adoption. We have others who have had their children in foster homes for long periods of time and I understand that's the primary concern for you. In many cases that's a real toughie. It's a real toughie.

I was hearing some of the judges' testimony, and feeling—I think we share the concern for parental rights. We want to see families together if it's at all possible, and if the child can survive it, in effect.

But there are some very questionable areas. I can think of one family where the mother consistently said, "I want my child and I am going to fight for her," and I think visited maybe once or twice a year and the child was in a foster home for 5 years. It took still a major battle to have the child finally put up for adoption, which we supported. After 5 years the child still has no mother, no permanent mother and I think it is difficult, well, I think we all know that. It's difficult in a foster home because there's nothing permanent. It's by definition temporary. "Where do I belong?"

So, I think there are a lot of gray areas. We've had some mothers who could learn parenting—and fathers, too. We have had mothers who have felt they could not, who could not bring themselves to relinquish the child. We've had others who are still struggling and where the children have been in foster homes a year or two, and that's a long time in the life of a child. We're still looking for answers.

Another basic belief that we have that I think all here share: The families in which children get hurt are generally isolated from the world around them, from other people and have a great deal of difficulty reaching out for help.

So, a lot of what we do is geared to try to penetrate the isolation of these families in their four walls. In one case, literally, there was a woman who was living with her child with blinds drawn and could not bring herself to go forth except to get food and scamper back home.

To come to Cedar House initially she had to come before the rest of the group arrived. She would have to be there first to feel safe enough to walk in our door.

It took a lot of reaching out to her to get her there the first time. We had to go to her turf and be with her and help her feel safe before she would come and walk in our door.

Many of these families are very isolated. We meet them in a big house because our feeling is that institutional settings and agencies are very scary for families who feel they have nothing to offer to walk into, especially if they have at one time been reported for abuse because that is the ultimate in, "How could you." They feel this themselves. They may hear that from outside but they already feel that inside and they expect that to be the response to them. And it's very scary.

We have had mothers that have walked by the front door maybe 10 times before they could get up the courage to walk in. It takes a lot of reaching out and just basic caring. This is something which Marilyn does so well. She's the one that lives at Cedar House, and she just has a knack for making people feel safe.

Another of our convictions is that the treatment of child abuse takes everybody. It cannot be done by a therapist sitting in an office; it cannot be done by one person in any setting—I don't care what the

setting is. It takes a network of people and we have worked very hard in Long Beach getting a network of caring people.

In Long Beach we have the Greater Long Beach Child Trauma Council, which has 15 or more agencies at this point—but even more than that the council has helped set up an informal network.

Thanks to the context that we have, it makes it very easy when we have a child that comes in hurt to call up a hospital and say now we need to bring someone in. We'll come along with them and people move right in. It's just beautiful work when there are people that know each other working together and trying to help this family get through their difficult situation and get to a better place, to make use of it so it gets them to a better place instead of becoming more isolated.

The other conviction that is really strong—I think it's becoming stronger by the year—is that it is not enough simply to see the parents and hope that the children get better. Programs work that way, and they are certainly better than nothing. We have felt it was very important, however, to us to see the children and when we hear what the children have to say, it completes the picture for us. We would not get the whole picture of what happens in the family just by talking with the parent. It helps to go to their turf. It's essential in my mind to make home visits and just sit with them; let them serve us coffee. They have something to offer us as well.

We have the adults in groups—which is one of our modalities—on one side of the house; the children are in their own group on another side of the house.

And then at the end of the group we get together and compare; kind of feed back to the adults what's been happening with the children, what their behavior has been today or anything that we feel that we need to share. It's especially fun to share the good things when the children have just been full of joy that day. It is so nice to feed that back to the parent.

At times we find a real discrepancy between the child's behavior and the parent's behavior. The parent is saying "Oh, it's been a marvelous week. Everything has been going smoothly," and the kid is climbing the walls. If we saw only the parent we would not get the clue that anything was happening.

In one instance at the end of group when that was fed back to a parent, she burst into tears and all kinds of things came out on what she had been doing that week. But, we would not have known. She would have walked out that door still hurting just as bad as she was hurting if we had not seen the child.

In other instances the parent is saying, "Oh, I've been a terrible parent this week;" but the child is fine. And in other instances the two are saying the same thing.

It gives us some very interesting clues and the children really have a lot to say to us. They let us know.

We've had instances of a child saying "My mom hit me this week and that made me so mad," and we bring it up to the parent. We say to the child, "You're saying that you got hit this week," the parent says, "Oh, no. I didn't hit him. No. Everything's been fine this week—well, I popped him one." And then we get into defining: How do you pop?

And, when the mother—I keep talking about the mothers. We do have the men there also. As it happens, I'm not working in the men's

group so I tend to think primarily of the mothers. When the mothers role-play sometimes, what they did, Marilyn has been the recipient. Maybe you could tell about that one time.

STATEMENT OF MARILYN JOHNSON, CRISIS COUNSELOR, RESIDENT, CEDAR HOUSE

Ms. JOHNSON. This is where, in the children's group the little boy was indicating that he was hurting and the mother was describing an instant where she had grabbed him by the arm and said "I couldn't have hurt him." And so we asked her to demonstrate. I played the part of the child and she really got into it and when she grabbed me by the arm it really hurt and she wasn't aware of that.

She wasn't aware of her strength and how it would feel for the child.

Ms. KENDIG. To her, she would say simply that I spanked him or I grabbed him and it was nothing. But she was a powerful lady.

Ms. JOHNSON. And when she grabbed, it hurt.

Ms. KENDIG. OK. Our programing includes the usual modalities of the group and individual treatment, marital counseling. We're very fortunate to have a wide flexibility of ways that we can go.

We try to include a lot of playing. We have parties that the families help plan and at our open houses families are hosts and hostesses at the parties.

We have a 24-hour call for our families. We are not on call to the whole community generally, with some exceptions but our families can reach us at any time.

We have a drop-in house where they can come by, just knowing that we're there and come by with the kids and get a cup of coffee and have somebody sit with them. We have a great many volunteers. This is part of my feeling of the inclusiveness.

There are a couple of concerns I wanted to speak to you, one of which is my feeling that I don't think this is just a problem for the parents to deal with or just the courts or—it takes the whole community. I personally am a therapist but Marilyn is a paraprofessional. She can give something I cannot give, and many of the volunteers can do things that are therapeutical.

They can give so much that I could not give. And there's no one human being that can. It's a team, all together, and hopefully we can fill some of the gaps that have been there but it really takes us all and I question a program which is trying to do it alone. This may not be fair, but in my own mind—I was a part of a program which was trying to treat families on the one hourly basis with a therapist. I could not touch the problems. I just could not touch them. We find with the families who have been so distrustful and could not reach out, that when they finally can, there comes what we call an intensive care period when they are constantly there. It's very demanding work. It takes a team because no one person could take that kind of a demand but it is a part of the growth process.

We allow them to come as much as they want to during this intensive care phase to simply receive and receive and play. They want to play with us.

And then we expect that they will grow beyond the need for that and it is very exciting to watch them do that.

One of my concerns—there are two things that I'd like to speak to. One is the training of therapists. We have been noticing of late that it seems that many schools teach ways to distance yourself from these people—to sit in your own office expecting them to come for help. When they do not we have frequently heard that they're "resisting." One of the first eye-openers for me was going with the families to places you're referring them to. I had always made referrals and thought I had done my job. When I went along on some of the referrals to help them through the intake process or whatever it was, it was a real eye opener to see how difficult it is to sit with a hyperactive child in a waiting room for an hour—maybe to get in to see somebody to get help. In one instance a mother was asked to come back. She had an 18-month-old child who was rather large and she was seen for the intake which was all right, but she was told to come back to arrange the fees. This meant another bus trip carrying this large child and having to walk several blocks to get there, all this without any clear offer to help. She never would have returned on her own—I gave her a ride.

There are demands made that some people simply cannot meet, particularly the ones who are hurting so bad and who have never experienced real help. We have since talked about that with that particular agency, and they simplified their setting of fees. It takes us all to figure ways for these families to get help.

I think my other big concern is the neglect cases. Our experience at this point tells us it's extremely difficult to get help to children of parents who simply do not know how to take care of them—the basic physical and emotional care. Some of these are psychotic parents.

Now I'm not saying rush out and haul children away from home, from psychotic parents; but I am saying there is a real problem if there is no other stable party in the children's lives. The psychotic parent may hear voices. In one instance the mother told us the voices told her to kill. She's very distrustful of others, so the child is rarely permitted to be near other people. The child is not safe, but without seeing the child, it is difficult to document the danger for court purposes. We have found it very discouraging.

Parents who will neglect their children tend to neglect everything around them. They are not going to continue coming once a week, regularly. It takes a great deal of reaching out, going to them time and again to maintain the contact and we've had some success in getting them to come to Cedar House. It always takes a great deal of involvement on our part, going to their house as well and then they will come to our house for a period of time. Then pretty soon they will not come and then we go again and bring them back.

Meanwhile we are seeing children—I can think of one infant who in her first year we could have predicted would not thrive. We knew the family before the child was born. In the first year the child was in the hospital with severe diarrhea, with pneumonia, with a broken leg. One time she fell down a flight of stairs in a stroller when she was left in the care of a 6-year-old. But with all of this happening there is a feeling that no petition could be sustained in court. It's just amazing to us.

The only thing we know to do is to document, which takes daily contact. There are very few agencies that have been able to do that. It takes daily contact or several times a week to document the condition

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of the children, and even then there is a question about what really can be done to remove the children from the parents. In that instance it seemed to me that the child's life indeed was in danger and yet, as we experienced it, nothing could be done.

I think there is one other area, and then I'll stop and let the others speak.

I have spoken of our trying to play a lot with our families. A lot of the parents never got a chance to play themselves as children and one of the rewards of this work is to watch people kind of loosen up and start kidding or just become playful. It is a delight. They come in looking so tired and they start to loosen up, it's just a pure pleasure.

This used to come very natural to us. We are finding as we are more in the public eye and as we are working with more families now—working from 35 to 40 families at this point and when you're talking about several times a week, that takes a lot of output of energy—we are finding it more difficult lately just to find time to play since we got into a long period of being evaluated. I know the need for accountability; I know the need for the paperwork; just accountability, but it came at a time when we were really involved in that and there was much less of the playfulness which feel is such an essential part of the treatment of these families.

Until the parents are able to play themselves, they are not really able to let their children play. It's very hard for them to let their child be a child.

Mr. CORMAN. Thank you very much. We appreciate your contribution.

Our next witness is Dr. James Kent from the U.S.C. School of Medicine.

STATEMENT OF JAMES KENT, ASSOCIATE CLINICAL PROFESSOR OF PEDIATRICS, U.S.C. SCHOOL OF MEDICINE AND DIRECTOR OF TREATMENT PROGRAM FOR ABUSED CHILDREN, BIG SISTER LEAGUE

Mr. KENT. My name is Jim Kent. I'm a pediatric psychologist at University of Southern California School of Medicine. A couple of months ago I was also at the Children's Hospital which is where our treatment program was. We're in the process of closing down there and I want to say something about that——

The REPORTER. Excuse me. Dr. Kent, I can't hear you. You're too close to the microphone and I'm getting sound waves.

Mr. KENT. I'll say something about the closing down of the treatment at Children's Hospital at the conclusion of my remarks.

Mr. CORMAN. I'm sorry Doctor, but we're still getting an echo. Will you push the mike back away from you.

Mr. KENT. I'll just push it aside.

Mr. CORMAN. OK.

Mr. KENT. I've been seeing abusive families in treatment since 1969—I have been doing research in the field since about 1972. Comments I make this morning are based on that span of experience so let me take up the bill. It's excellent. I like the provision. I'm very happy about it.

As a matter of fact, it seems so reasonable, to be so close to what is actually needed; there must be a catch.

Mr. CORMAN. Doctor, the catch is that the House and Senate Budget Committees are trying to kill it.

Mr. KENT. Will you please tell us how we can help; how we can help you.

I'm going to say one thing. We're especially pleased about the bill as it draws attention to more than one kind of risk in the cases of abuse. We've been preoccupied for years with the risk of reinjury to the children and because of that realization we have utilized the foster care system to prevent that from happening.

We seem to feel that if the parents can't care for the kids, then put the kids in foster care. As things turn out though, there are other risks, other than of reinjury. There's also the risk of what hapens to children who are turned loose to float in the foster care system. Some of the children fortunately do very well; some do not; and some do worse after they are removed than they were doing before. The average child we found in the early 1970's, when we did some followup research on kids in foster care here in Los Angeles—in foster care for abuse and neglect—we found that the longer they belonged to the foster care system, the poorer they looked.

It was a negative correlation between the intake status of the child in the followup in foster care. There was even a stronger negative correlation between the status of the child and the number of foster homes he was in.

In other words, the more homes you push the kids through, the worse they tend to look when you follow them up some years later, and for many of these children, it was "some years later." The average time for foster care is well over 3 years. That was with this group of abusive kids.

The findings should not be terribly surprising. That data and some others suggested there's a real good reason to believe that if you want to produce a seriously disturbed child, if you want to make a psychopath, what you do is take the kid away from his parents at a very early age and push him through a succession of foster homes with parenting figures for the first few years of his life. It's a sure-fire formula. The State has a patent on it.

So, the bill which is addressing to improve the quality of services in foster care or improve services to reunify the family, it is very, very welcome.

Now, does it follow from this then that it is the thing to push, to get all the kids back home? It certainly does not. It carries lots of problems with it too. There are risks no matter which way you turn.

Going back home isn't always a wonderful thing either. The Federal Government has now funded two rounds of demonstration projects of abuse and neglect and then some evaluations of those projects. Some 40-plus projects in total. They—I was the principal investigator for one of these studies and it is one that is not yet finished. It just concluded last year. The results are not especially encouraging in some respects. The re-injury rate amongst these children, even with the families in treatment is extraordinarily high, reaching over 50 percent in some of the projects.

In the first set of projects the range was 15 to 55 with the average of 35 percent. We're not sure what the average will work out to be on the second set of projects but it appears clear that it is also very high so the

risk of just dumping these kids back in the home without excellent services is substantial.

In 1973 we—the Children's Hospital—at that time developed a treatment program for the families in conjuction with a research program. There were two things we wanted to know. One was, was there some way we could get these kids back and get them home safely. And No. 2, when you did, what would the children look like some years later. I can tell you a little bit about the results of that now. First we learned that it was possible to get the kids back home and get them back home in a reasonable, short time—usually less than a year. The recidivism rate in this group of kids was less than 5 percent. None of the reabuse cases were serious with regard to injuries.

Mr. CORMAN. Doctor, I'm sorry. We're having some difficulty with that microphone. Maybe if you could stick it out well past where that glass is, maybe that will help.

The reporter is having difficulty hearing you. That will do it. I'm sorry. Go ahead, sir.

Mr. KENT. I can recap that in just a moment. It's possible with the range of services such as those that Bobbie talked about, such as those that Cedar House offers to reduce the incidents of reabuse of children who return to their families and bring it down very low.

As I say, in our case, it was down to about 4 percent. We were very proud of that figure. The figure we were not so proud of was if we look at what happened to the children it turned out that the kids—while the parents were getting better, were not getting better. In fact, some were getting worse.

So that 18 months, 2 years of time following the children up, it looked like their developmental rate was oftentimes no better than it was at intake and in some cases, it was worse.

Even though the parents were not abusive in this case. Which raises, I think, some questions about the traditional model services, and I think Bobbie mentioned this too, there's been a conventional wisdom in the field which has been that to treat these families what you do is pour a lot of nurturing into the parents; to leave the kids aside because if you pay attention to the kids the conventional wisdom is you're going to make the parents angry or jealous and resentful. So you bolster the parents and hope that the children are going to benefit from this. You can call this the "trickle down theory." Plugging the parents, the kids are going to get it as it trickles down. Based on our experience, based on clinical observations, the model does not work that way.

The kids don't seem to get better if they don't get services and assistance themselves. I'd like to point out also that although the Government's been in business for about 20 years now and there's a lot of people in the field that have too much in abuse and neglect services and research, there is almost no followup data on the affects of services on children—almost none.

There are two studies that I know of that follow children longitudinally and that's in 20 years. If we started this afternoon to start dispensing medication instead of human services the FDA would have us closed down by sundown and rightly so.

Mr. CORMAN. How old are those studies, Doctor?

Mr. KENT. They're both within the last 3 years.

Mr. CORMAN. But, they are complete?

Mr. KENT. They are complete.

Mr. CORMAN. If you would give the counsel the names of the reports, we might further take a look at those.

Mr. KENT. OK.

So, one conclusion here is, I think, the traditional services which a division methods of services and providing lots of treatment for the parents and nothing for the kids. We're hoping that the kids are going to benefit from it. It is not a useful way to go.

So, what we've done at this point is move from a treatment program which emphasizes parent services, one which emphasizes parents and children's services and doing it in the context of day care programs. Therapeutic day care, in which the children comment the same number of hours per week in which the parents are also required to come, take care of their kids, take care of other peoples kids. It's a way of being able to evaluate how the parents are with their children: evaluate their skills, evaluate their attitudes.

In a way we're finding it's much more useful, much more productive than ever learned from listening to parents' accounts in their office.

I think it may be a much more useful way, an efficient way to improving parenting skills and parents' attitudes about child rearing than traditional psychotherapy. It's therapeutic day care.

It also makes services—I shouldn't say it—makes a useful alternative to foster care sometimes. The option that Judge Giannini often has now with a high risk case is to either turn them loose in the foster care system—suitably place the child which means, effectively, that the parents are going to have 1 hour a week with their child or baby—or turn it back loose in the parent home where the monitoring and the services are unsure. The choices are not wonderful.

There's a third choice that we're suggesting and that is therapeutic day care programs where the kids can be at the day care center during the day, go back home in the evening. The parents, the relationship with the child is not breached or destroyed at the foster care system. That's an inaccurate statement. The foster care system doesn't do it. The separation does.

And, where it's possible to work with the parents during the day with the kids. It's cheaper than foster care also.

The last comment I want to make—when I started off I said this treatment program which offers the same kind of services as Cedar House does—the various kinds of therapy, individual and group plus Outreach for the parent, lay programs, social services for parents; that this program operated at Children's Hospital since 1973 and recently the program was closed down. The hospital is in some kinds of difficulties, looking around for ways of saving money and one way of saving money is to close down the child abuse treatment programs because there, you can't make money on child abuse.

There are no good child abuse jokes and no way to make money in child abuse; and it be some kind of coalition, for private and public funding.

We are fortunately going to be able to move the entire program lock, stock, and barrel to another private agency which probably has a more substantial commitment in some ways to the problem and is

quite willing to support these services privately with some mix from the public sector.

What will the public sector pay right now to keep their child at home with his parents, what kind of unification services are there. At this moment MediCal would pay me $23.70 an hour 2 hours a month to see a family. If that same family is under court jurisdiction, we'll assume it's going to have children's services worker, sometimes called treatment worker who with luck will be able to see the family an hour a month to make one visit because she's probably got a staggering workload of 50 or 60 cases. When you think about that the "treatment worker" takes on ironic overtones, so that family's going to get 3 hours a month, max. It's going to get—depending on what the social worker's time prices out at; somewhere between $65, maybe $70 a month. This is the State's commitment to keeping that child safe and at home.

They'll pay about four times that much to keep the child safe in a foster home. It seems to me the priorities are upside down.

Thank you.

Mr. CORMAN. Thank you very much, doctor. Let me say to all the panelists that we'll hear from all of you and that if you stay here we'll have some questions of each of you. It's very interesting testimony.

Miss Helen Kleinberg and Marilyn Brainard.

STATEMENT OF HELEN KLEINBERG, ON BEHALF OF THE CHILDREN'S BUREAU OF LOS ANGELES

Miss KLEINBERG. We're two volunteers and we come representing the Children's Bureau of Los Angeles. We have both been very active in the program called the family crisis center. I'm going to speak for a few minutes and give you an idea of how we got started and exactly what the center is. Marilyn's going to coordinate the directed volunteer effort and she will then give you a few minutes of telling you about how our volunteers are working.

I have to say first that's it's a pleasure to be on the program with Cedar House and with Children's Hospital; both of them instrumental in our beginning our program. We have looked to both organizations for information and help.

About 3 years ago the Children's Bureau was an old established agency in the Los Angeles area primarily involved in foster care and adoptions and in running group homes; decided that they would like to expand their services in the San Fernando Valley.

In order to do that they decided to put together a council of representatives from the community. The council was to be composed of various people working in social services areas, hospitals, schools, private physicians, lay persons, such as myself and Marilyn, and people representing political people in the community. The group met and decided that there were many social services that were needed in the valley but that the best way to go about it was to really do a study on it in that particular area.

We therefore instituted a study that included going into about 25 agencies and talking to just about everybody we could think of that would listen to us, to find out what service was really the most needed in the valley area; what would determine where two services were

needed. One was a crises prevention center, a 24-hour crisis prevention center because they told us—the hospitals and the police particularly—that they had people who came to them at night who said they thought their child was going to be abused. They had a husband who was an alcoholic or boyfriend on drugs; where they themselves felt at loose ends and both the police and the hospital said, "There's really nothing we can do unless that child has been abused or unless a crime has been committed. There is no place to send you if you think that something terrible is going to happen," and we also had stories from schools that said that they had parents calling them in the middle of the night and saying "I can't stand it any longer. Here's my address. I'm keeping the child in its crib."

And these type of horror stories—really began to get to us. We also interestingly enough did consider a therapeutic day care center and that was our second priority and something that Dr. Kent is now involved in and it would be interesting someday if we can perhaps combine these two programs together and really come out with something super.

At any rate, what we did was to build a model for a crisis prevention center, a 24-hour center, a shelter. We could not find a model to follow. There was a model in Tucson but there is no social service component involved in that particular model. It is some sisters and they just take the children in and keep the children overnight.

We wanted something where we would be involved with the family with the idea to help the family to keep the family together. We decided on a residence, a home—as the agency has already run some group homes—a home with house parents who would live there around the clock, a place where someone could come for shelter and stay up to 72 hours, where there would be social services available immediately and a time for respite and a time to help the family decide how they can get out of the problem.

The model was to include parents coming with a child or children coming by themselves. We sought funding from the private sector and in addition to that received $10,000 from United Way. We were funded for our first year and half completely by private foundations. We have now been in business a little over a year and we are going to be out seeking more funds now and we are getting down to the bottom on what we originally had.

We've learned a great deal from our first year. We have from beginning in February 1979—we have—are now filling our house almost every night. We are permitted to have six children and two adults. That is the normal regulations for a group home. There are no regulations on the books for the type of shelter that we have.

Initially we were very disappointed and hoped that we would be able to accommodate many more and tried very hard to work with the fire department and various health regulations and that kind of thing to allow to take in more than that. Our facility could accommodate them but we were not successful in that area and at this moment, maybe we were fortunate that we were not.

We have found that keeping it small has given quality service to people that come to us. We have discovered that our people are coming to us and staying much longer than 72 hours. Most of the people last month were with us 9 days. The average for the year was 5 days.

People in crisis need a time to just sort of relax and to, shall we say, get their act together. We have two social workers working in the house; the director of the program and a social worker working with these people.

The people come in; they are given certain rules and regulations; we are taking only mothers now with their children, or the children by themselves. We are not having any fathers. The facility is too small. We just cannot accommodate that because of privacy problems.

Down the line there has been some discussion about trying to establish a house just for fathers and that's an interesting situation which someday we'll have the funding to be able to look into that and whether that would fly.

At any rate, right now we are seeing a large percentage of the population from whole Los Angeles area. We have worked very hard to publicize our home. We have put posters up at shopping centers and things like that. We have informed all of the various social services about our function. Our Advisory Board still functions and those people are in the community and out there letting people and clients know that we are available.

There is no fee charged for coming to our home for shelter. We try to follow these people up afterward; we refer out to other community agencies. We are also a part of the Children's Bureau which have a myriad of other services that they offer, what with counseling and foster care, group home therapy, adoption and that kind of thing.

We find that we have a few people repeating and coming back to us. One lady came to us three time. We find that our people are keeping in touch with us. They are isolated people. They are people that are badly in need of social networking. It takes days in our house for them to develop a trust. For them to talk to the social worker and to let them try to help them and find the means to help them.

We've also discovered something that we did not realize at the beginning and that is there is a crying need for parent education. We have indeed instituted parent education programing out of our house.

A lot of the clients coming to us therefore are then put into the parent education classes which they wish to attend. We have a nice arrangement where the children are cared for by volunteers and baby-sitters for the children during the classes. The classes meet once a week. We would like to expand that program and we have a need to expand the program but as yet, do not have the facility or the funds to expand that particular program.

The very interesting part of what we have discovered in our home is that parents living in a house with their children, with trained house parents, with trained social workers and with volunteers are watching people handle their own children in ways those children have never been handled before and are amazed to find that there are such things as parenting skills; that there are ways to handle the problems other than the ways that they have been doing with those children.

We hope that we are starting to break some of the pattern of the abuser growing up and then becoming an abuser themselves—or herself.

We've also discovered that the house helps in some ways with separation. If separation is necessary, our social workers have found that it is a good transitional point. It is a place where people are willing, if they

can see, that they no longer, that they in no way have the emotional equipment to handle their children and we have placed some children from our home into foster care.

Last year we serviced approximately 100 adults and approximately 225 children. We have placed about 23 of those children in foster care. The rest are with their parents and a number of them are participating in our parent education program and numbers of them are still on the phone to our social workers and to our volunteers and at least people feel that they have made some friendship in the community and someplace that they can call and when they have a need there's somebody on the other end of the telephone that cares about them.

We are servicing about 38 percent of the people; they are minority people, which was a surprise. We did not think we were doing that well in getting to the minority community, but somehow we are, and we're very pleased with that.

We are seeing people from varied marital status; almost even in fact, in terms of unmarried, married, separated; a little lower on the divorce end.

We are now going to be going into an evaluation program and as Dr. Kent said this is one bad failing of all the social services is that we do not evaluate ourselves well. There doesn't seem to be a lot of money out there for evaluating and so therefore we get so interested in our own services that we don't go about evaluating. We spend a great deal of time worrying about how we will evaluate this program. We created a sheet for our people to fill out as they are leaving the house and we are looking at those sheets.

In addition, we have designed a telephone contact with past clients with a sheet and a number of questions asking what we did right, what we did wrong and how did they feel their stay in the center helped them, what would they recommend that we do in terms of changing the center and these kinds of questions and that is just being implemented now.

How valid some of this will be, I don't know but we are hoping it will be worth some feedback at least to give us some idea of what our client thinks of the services provided.

One of the most important components of that particular service is our volunteers. I'm going to let Marilyn tell you about them.

STATEMENT OF MARILYN BRAINARD, ON BEHALF OF THE CHILDREN'S BUREAU OF LOS ANGELES

Ms. BRAINARD. Can you hear me all right or am I echoing? All right. Thank you Congressman Corman for inviting us here today to speak. I think it's a real privilege.

And especially since the crisis center is out in your territory, so to speak, right in your district we are hoping you can come by and visit. I don't know if you'll have a chance on this trip out. You can either stop by this afternoon or the next time. We'd like to have you see the crisis center in person.

I hope you'll let us know. We'd like to see you.

Mr. CORMAN. We shall do that.

Ms. BRAINARD. OK. I was involved as first volunteer coordinator to help recruit volunteers in the community. And it was a very interest-

ing experience. A lot of time but very, very worthwhile. We recruited through newspapers and messages—messages on the radio, primarily through newspapers, and had a fantastic outpouring of response from the community and our first training and education sessions we had over a hundred people show up. We were a bit overwhelmed. We were worrying about, you know, havng enough volunteers.

There is a lot of self-selection I think that takes place, rightly so, on our volunteers in the child abuse program. Some people are not suited to be volunteers on working with either the children or the parents, especially. So, we are now down to a corps of about 40 volunteers, both from last spring orientation and this fall.

The volunteers that we have are serving in many ways. They are truly dedicated and we could not run this program without volunteers. They serve as—on the open line, talking to incoming, you know, parents, or placement at the center, or many of the calls are for housing—that's another big problem; housing for mothers. There's really not abuse present but they do need housing so we have volunteers who are there on the open line.

We have child aides, assistant house parents at the crisis center; also our parent-ed classes. I saw it pointed out. It's not really just babysitting because the director of the program who is running the parented class meets with the volunteers who were with the children while the parents are in the parent-ed class and gets feedback and there's part of this so you know what's going on with the children. We have similar services as family aides when the family uses the crisis center, or is in a parent-ed class, there is a volunteer in there working with the family in that setting. We have a public information committee attempting to outreach into the whole—especially the valid—community; to get to the schools, service groups, to women's clubs; to let everyone know about the crisis center and that there is some service available to the community.

Many of our volunteers, about 35, assisted at the National Conference on Child Abuse and Neglect which was last October here in Los Angeles. We found that very worthwhile—a worthwhile experience. You get to hear some good speakers plus helping out with the conference. The majority of the furnishings at the center also are provided by our volunteers, primarily, or by their friends. We're very fortunate that way. People come over and they see the center and they get interested in it and they remember us and then give things to the center.

The administrative and the office work for the volunteers are primarily done by members of the Volunteer League of San Fernando Valley, of which I am a member. And we have each one of our community projects, four or five different projects, which we are still involved with in the crisis program that way.

Also some of the volunteers we recruited decided they really didn't want to work in the crisis center situation because it was not an ongoing necessary relationship, you know, with the child or with the parent, and so feeling that way they have gone to another agency. Many of these volunteers are now working in a group home—the therapeutic group homes. They like this for a special friend or child they can bake a birthday cake for—the children at their home and that kind of thing.

We have one very special volunteer here who's said, "Well, there's really not anything I can do but I would like to do something at the center for the children." She came over the day before Thanksgiving—she has her own family—she came over and cooked a complete Thanksgiving dinner for the houseparents and for the clients at the crisis center including two home-baked pies. She's one of the super volunteers. Who else would do that? Who did, you know, double the duty on a holiday?

The board of directors of Children's Bureau made us realize how important the volunteers component is to the operations of the crisis center. Because, very frankly, we could not afford to operate; we do not have enough staff to provide services without a large volunteer component. So this last month they funded a lovely luncheon at a restaurant in the valley, which Helen did most of the work on to coordinate it, and it was fantastic. And the board felt it was very worthwhile; that we do need to recognize all the volunteers.

I think anybody involved in volunteer service realizes that you do need to give some pats on the back and you do need to give some recognition and so we do do that and we also are starting a newsletter, only this letter is for just the volunteers, to put the spotlight on the volunteers, what they are doing, to update everyone at the center.

I think one of the frustrations I personally felt in working with the volunteers is not to have enough time to get on the phone and call every volunteer once a month and say, "How's everything going?" Just couldn't do it, you know; there was other work that we had to do. But we are trying to have some meetings, some evaluation meetings together, where volunteers can come and have their gripes and "grints"—a meeting where they can come give their input and they have given very valuable input; I've seen some program changes take place because the volunteers have helped evaluate the program.

We already mentioned today the research has shown that certainly paraprofessionals are very effective working with abusive parents and potentially abusive parents and in part the value is, for many of these parents, is they step back and they just can't believe that someone who's not being paid, is not staff, actually wants to be there, wants to help them. And I think that's very important, that they know that person is there only because he or she cares.

Our families really do, I think, follow the standards of the Children's Bureau which is we mend families and we build families, and our volunteers do feel that way. If they do not feel that way, they do not stay a volunteer with the crisis center.

I think that you may say why would a woman want to go into volunteering in this particular area? I think this; just—you hear a hope from one discharge statement from a client when he had left the center and it kind of makes it all worthwhile.

One of the mothers wrote a letter right after she left the center and said, "I tremor when I think what would have happened to my baby if you weren't there." And when you hear something like that you think well, gee, it really was worthwhile and I'm glad that I'm doing—volunteering—something, and that it does show.

One of my concerns—this is personally, I want to say off the record and I know we're on the record—but I'm very concerned that because of our economy we are going to see, I think, a rapid increase in child

abuse and the experts feel this. Today, families can't even paddle and keep an even keel. They're going to slide back because of the inflation and lower buying power of the dollar so we're very concerned that we're going to see more and more cases. I hope that legislation can be enacted, Congressman, that would help fund some of these programs that we know are successful—we see them working—so we can help stem this tide and not see the cycle continuing. Maybe if that young teenage mother back in Virginia had a crisis center to turn to—I think it was in last week's paper where she had killed her 13-month-old child and then was on bail and 9 days later killed her 13-day-old infant—maybe if she had had a place to turn, that wouldn't have happened.

We hope that you will consider funding four of the private agencies as well for the public as we feel we are doing a fantastic job in meeting the needs of the valley and we do hope you'll come soon and see our center.

Mr. CORMAN. Thank you. I'm sure we will. Dr. Damon?

STATEMENT OF LINDA DAMON, THE FAMILY STRESS PROGRAM

Ms. DAMON. Here. Linda Damon. I'm delighted to be here with my colleagues and these agencies and also delighted with your bill. I think it's wonderful.

I don't want to be too redundant. I'll maybe highlight a few things that people have said.

My program I'm head of is a family stress program and child abuse prevention program for children 5 years of age and under and their families.

And the reason for focusing on that very early age is that it's been found that the majority of abuse occurs at a very early age and is the very serious abuse. And also the philosophy of our program is that you do attempt to look at the attachment that forms very early between the parent and the child and to try to help that process along—help the bonding attachment because when there is faulty attachment, then that does—I think that tends to intensify the possibility of child abuse and neglect.

Also we have plenty of research by this time to know that mismatches in temperament between the parent and the child, physical problems in a child, can lead—can make a family more at risk, make a child more at risk for abuse so it's real important for the focusing on infancy and early childhood and the relationship between the parent and the child.

I want to stress what other colleagues have said in terms of the importance of working with the children and both the parents because I think in the past very often parents go in for treatment and the agency's been told to fix them up and place the children in foster homes. So, the child has been out of the process.

What we do in our own setting, we do family work and look very closely at the interaction between the child and the parent because very often you can identify some of the problems that are unique to them and to that family that will trigger that family into a crisis.

And, by watching that interaction you can really constructively intervene and point out, do modeling for the parents in terms of how

to concretely intervene, because it's one thing to totally deal with the parents' past and their own feelings about their parents and it's a whole different ballpark when you get in there and you start looking at the interactions and the problemmatic interactions that are intensifying the possibility of an explosion between the parents and the children.

In our own setting we do similar things that other people do. We use a group model where the parents and the children are in the same room and we do that so that we can have interaction between them. We can watch the process of attachment and bonding and we can check the children out for bruises every week; we can get the children's input, we have play therapists working with the children and adult therapists as well as time for interaction.

And one model—one reason we try to do the group model as much as possible is in order to bulid up this important network which everybody else has emphasized. We encourage them to come in more than once a week. We encourage them to use one another as support figures and also utilize the volunteers, parent aids, trainees, the whole bit.

We try to provide the ultimate of services. Providing services—again, I want to emphasize, is so costly—you don't have a job if you don't really provide advocacy services for the parents; you want to help refer them to help them get jobs. I want to emphasize what a highlight is in terms of unemployment. There have been studies showing that increase in unemployment in England was the study—an increase in unemployment was directly correlated to an increase in child abuse and so that dealing with father's unemployment is a very delicate thing—his low self-esteem, the increased contact between him and the children during unemployment.

And as one advocate you want to refer them; you want to help them to improve the referral process, get jobs, to find nursery schools. We refer to children's bureau so they have a place to go when the parents are in a crisis; where they can feel safe.

The use of volunteers in training is very costly because you've got to train them. You got to be there. You've got to supervise them.

I think—I think that our intervention techniques really are working. I'm feeling very optimistic. I must say I'm only—our program has been in operation 4 years; I've been head of the program 2 years and we are also doing research and so far we're really encouraged. We have a reabuse rate of around 20 percent.

And, of course it's always hard to know how to evaluate that but with people that come in and remain in treatment; that's our reabuse rate for right now. So, we're happy about that. We'd like to always keep on reducing that.

Another thing I want to stress is it seems real important to have the parent observing other people working with their children because they do get other ideas of how to work with their children.

Another thing that we do with the parents is try to stress the important situation events and how these affect their children because so often you're completely unaware of how anything they do or any situation that's impinging on them affects their children so they'll come in—the child will be off the wall, will be noticing that—the child's running all over the place and trying to hit other kids. We'll be asking the parent about it and we'll say, "what's different" and they'll say, "Well,

my boyfriend and I had a big fight last night and he beat me, and you know, he left," and all of a sudden you have information so again it's real important to have the parents and children together and to be able to interpret to the parents the importance of situation or events in causing their children's behavior.

I think it's also real important to do outreach into the community. We've been real fortunate to have a HUD contract allowing us to do some outreach and that contract is threatened so I don't know if we'll be able to continue that but we've done a lot of outreach to Head Start sites, nursery schools, to the lower socioeconomic status and to the Spanish-speaking people in the valley and have found that to be real successful.

Many people who would ordinarily never come to a clinic or to a mental health center are now coming or else we're going out there to them providing workshops in the community and starting to identify potential child abuse cases out there. I really hope that can continue. I think the course of prevention is one of the first things to go but I think it's really really important.

In line with prevention, I also want to say that we are doing a lot of prevention work for families that have not been identified by DPSS but they are important too. They're the people who are not severe abusers but are still abusive. We have fathers coming who slam their kids and little bodies agains the wall. Now they haven't been picked up by DPSS. They come into us after it's done. There's no report made but they're really—they're at risk for abuse and their children will also be a risk for being abused by the parents if there weren't interventions made. These families come in and are able to really utilize the services well and quickly, unlike your hard core abusers.

Also we—it's important to provide evening services so that the fathers can come in. Weekend services, if you can do it, because he's an important component that's often left out.

Also another thing that we're experimenting with and is very successful right now is providing short-term workshops for parents and their infants and toddlers. These are 12-week workshops and the fathers are also included in evening meetings and we are teaching these groups how to be a support to themselves when they leave the clinics so that they are self-help groups who continue these groups in the community and of course this is cost efficient and seems to be working very well.

I want to say just a few things also about foster care placement. I think it's real important to provide advocacy assistance to parents whose children are in foster homes because very often the parents do not continue visitation with the children because they're embarrassed, they're ashamed, they're afraid to go, and I think it's real important to help them to continue those visitations with the children when they're in foster homes when it's necessary to remove a child so as to keep the interaction between the parent and the children.

Another thing I want to address is that there are times when children are placed very far away and it does make it difficult to the parent to visit the children. That doesn't happen very often and I know that DPSS has worked very hard to keep the parents and children close together but I think it's real destructive when they're so far apart

that it's had to have visitation and also when they're so far apart it's impossible to have treatment of the parent and the children jointly.

So you have a parent who in some cases—the child's in San Pedro and the parents are in the valley and they have no transportation and so there's no way for us to treat them together as a family unit.

Mr. CORMAN. May I ask what your practice is if a parent comes in and says, "I have abused my child," and you determine it is a very serious case. Do you refer that to the police authorities?

Ms. DAMON. Absolutely. Whenever we see any evidence of abuse we immediately will contact the DPSS worker. We tell the parents we are doing that; often the parents will be in our office and we try to arrange it so that there's—so that the families know what to expect—a black and white may come possibly or a worker and we explain to them the importance of making the report; that they know we are trying to protect the children and protect them from reabusing their children. We try to help them see it as helpful rather than hurtful, if possible.

I think that's all I have to say for now.

Mr. CORMAN. Thank you very much. Mrs. Phillips?

Mrs. PHILLIPS. I have just one question. In a lot of the work that we do on our committee we have to constantly remind ourselves of what a high percentage of mothers are working now and I think the current statistics are something like mothers whose youngest child is under age 3, 39 percent of them are working and whose youngest child is between 3 and 5, 50 percent are working and 60 percent of mothers whose youngest child is between 6 and 13 are working.

When I listen to all of the people here this morning who are working with the parents of the abused children, No. 1, with a few exceptions, I think my perception was that you were talking about working with the mothers and No. 2. I got this feeling that most of these mothers that you were talking about are not in the work force and I was wondering was that a correct perception and second of all, is there any relationship between mother's employment and child abuse and do you have in your programs hours that are available for mothers that are working who are concerned with abuse so that they don't have to come to your services between 9 and 5 but on weekends or on evenings—anybody.

Miss KLEINBERG. Well, our facility is open and available 24 hours, all the time. Well, not to everyone but to people who we have in intake, when we have the space anytime they are not. The bulk of our people I would imagine are people who are working; 30 percent of our people last year were on welfare. Most people we are seeing currently are not working but we don't have our statistics out yet on that.

Ms. DAMON. We have the same statistics—with 30 percent of our mothers who are on welfare. We do provide evening services for working mothers because they—most of them cannot get off work but of course we don't have enough staff. That's another problem.

Miss KLEINBERG. We run our parent-ed class at night.

Mrs. PHILLIPS. Do you find that working type mothers are as abusive with their children as mothers who stay home in the four walls all day?

Ms. DAMON. It would minimize some of the abuse because of fewer hours with the children but I'm thinking the working mothers we

have—we have some who are—they would tend to be sporadic in their work as they are correcting their lives so we will arrange counseling for them—for the working mother according to her hours so that she can maintain her job.

Mr. CORMAN. Dr. Kent, you were mentioning the lack of research but that raises a fascinating question. If the mother is away from the child 35 or 40 hours a week, she should tend to be less abusive but then of course the other important question is what's happening to the child during that 35 or 40 hours a week.

Mr. KENT. The unemployment in our mothers is higher than 80 percent of our families that are connected to ADC; most of the mothers don't work and one of our services is to try to get the women plugged into and program the CETA program and I think the CETA program now may go down the tubes, most of the defense budget, it's really feel a sore spot of the Defense Department.

It's a source of independence for the mothers; it's a source of self-esteem. Some of the youngsters from the families we see, the children are abused because the mothers feel that they are so dependent on someone else to provide wherewithal to raise their family that they're willing to stay in relationships with a man that are abusive and fool themselves about what's happening because there's so much need of financial support that that man brings to get away from that and give them a substitution.

Miss KLEINBERG. Most of our mothers are isolated people. They're people who don't have friends, don't know anyone in the community, don't have any idea of any of the services that are available for them in the community, don't have families and are just really at wits end.

Don't forget the abuser is not necessarily the mother either. We have lots of fathers and boyfriends who are abusers; so that when you're looking at it, it's not just the mother who's the component. There's a lot out there, you know. It could be, you know, a whole family problem; it's a whole relationship and the mother just needs support and therefore just hops from one man to another, whoever will take her in for *x* period of time.

Mr. CORMAN. I want to thank the panel very much. We will be taking a 5-minute recess and I'll just call attention of our final panel. We have three panels and 2 hours so we may have to move along a little more quickly.

Your contribution to this committee has been very significant and we appreciate it so much. Thank you again.

[Short recess taken.]

Mr. CORMAN. Ladies, we're pleased to welcome you to the committee and you may proceed.

STATEMENT OF LOUISE FLEENOR, PROJECT DIRECTOR, ADOPTION RESOURCE CENTER, REGION 9, LOS ANGELES, CALIF.

Ms. FLEENOR. I'm Louise Fleenor and I am very pleased to be here. I am a project director of the Adoption Resorce Center, for region 9 which is a Federal grant project administered by Los Angeles County Department of Adoptions.

I think Im particularly pleased to be here because we're part of the implementation of some other child abuse and treatment legislation

(Public Law 95–266); and because of the Child Abuse Treatment Act of 1978 the resource centers are now functional throughout the 10 regions of HEW and we are here specifically to address barriers to adoption and to begin the network that can eliminate these barriers as we place more and more difficult children. Therefore, in looking at H.R. 3434 we need to remember that there is other legislation that is very meaningful to kids and to adoption in particular.

I am going to speak only to one issue and that is the adoption subsidies today, but I don't want this to be misconstrued that this is the only barrier to adoption, nor is it the primary barrier. It's one of the very large barriers and one that I think we need to address as we move difficult-to-place children, with expensive needs, from one home into the permanent home of a different sort.

At any one time in region 9—region 9 covers Arizona, Nevada, California, Hawaii, and the Pacific Islands—there are about 30,000 children in foster care and in 19——

Mr. CORMAN. What geographic area is region 9?

Ms. FLEENOR. Nevada, Hawaii, California, Arizona, and the Pacific islands: American Samoa, Guam, and the Pacific Trust Territories.

Mr. CORMAN. And there are only 30,000?

Ms. FLEENOR. About 30,000 children in foster care in region 9 at any one time. In 1978 there were 5,000 adoptive placements made in region 9. These adoptive placements were made from a variety of sources. Some of them were independent adoptions; some were placed through licensed agencies but all were children moving from one family, permanently into another family and that's a great many children moving just within this region, so we cannot underestimate what happens with the permanent movement of children.

There has been much emphasis recently on the Model Adoption Act and we will be having public hearings on that act here in approximately 2 weeks. That particular piece of legislation also addresses the need for subsidy.

In going throughout region 9 and beginning to implement the Child Abuse and Treatment Act of 1978 (Public Law 95–266) we evaluated the barriers to adoption and of the primary barriers that can be more easily resolved, the lack of subsidy is one. There are other barriers that are equally important, some of them more difficult to do anything about.

I would like to briefly demonstrate what happens in different kinds of subsidy programs and how they are administered because I think those are the kind of things that you probably want to hear. Also, I've been asked to discuss what happens when subsidies move between States and I would like to talk to that issue.

The four States in region 9 are really a microcosm of what happens with subsidies and adoptions in general in the United States.

Arizona, by far, has the most liberal subsidy program. It's very similar to what is in H.R. 3434 right now and I'd like to give you an example of what happens with that kind of subsidy program and what could happen with that kind of funding elsewhere. From August 1976 through March 1978, Arizona placed 203 children, 16 percent with subsidies. This is a rather small amount of children. From April 1978 through December 1979, a similar period, their placements rose to 460 children placed in permanent adoptive homes; 41 percent of which

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were subsidized. This was an increase of adoptive placement in the State of Arizona of 127 percent. It increased their subsidy program by 467 percent. The sole reason for the change, in the placement rate in Arizona was that the subsidy program that Arizona had enacted was widely distributed; there was much emphasis in training of workers and encouragement to use the subsidy program when it was appropriate.

Arizona has a very interesting philosophical approach to subsidy; similar to the Model Act and similar to H.R. 3434 in that they firmly believe that the subsidy is tied to the child and his needs and once his eligibility is established, it is of no consequence in regard to the family ability or lack of ability to pay for his care. So, wherever he goes, the subsidy goes with him, thereby opening up adoption to many people who may not be able to afford the child's needs but not limiting it only to those people. In other words, they do not have a means test and it is similar to H.R. 3434 because there is no means that necessary regarding H.R. 3434 either.

Arizona spends about $500,000 a year on their subsidy program right now. There is a catch-22 in this in that Arizona can contract with their adoptive families for the full childhood of that child for subsidy payment. However the catch is that each year the State votes for the appropriation of those funds, therefore what is contracted by the Department of Economic Security and what is voted by the legislature each year can be different.

California—the very large complicated State that we have—has had some kind of subsidy program since 1969 when it started as a pilot project which in 1972 became a project throughout the entire State of California.

In 1979 California spent $2,698,000 on adoption subsidies; 2,260 children were placed by licensed agencies in California and 600 of those received subisidies. So 28 percent of the placements we had in California in 1979 were subsidized adoptions.

At any one time in the California State system there are between 1,800 and 2,000 children on subsidy. The way that this works is different in California than Arizona in that the California eligibility is only for 5 years, so it is a limited subsidy program; eligibility is for 3 years; but the subsidy can be renewed for an additional 2 years for medical reasons only.

The subsidy does not cover all of the children that are needing to go into placement in California. Many times there are sibling groups that have been living with foster parents for an extended period of time whom the foster parents cannot support on their current income. However, because of the limitation of the 5 years they are not able to adopt those children in that the subsidy will run out in the teen years of the child when the child needs the subsidy the most. This is a difficult situation in California.

In talking with the State people from California and some of the adoption agency people there is every reason to believe that with a national subsidy program considerably more children could be placed for adoption in California. These children are now in foster homes and will be staying there and not able to go back to their birth families for whatever reason.

Nevada has a ceiling on their subsidy program to the total of $10,000 a year so they spend up to that amount and that's the end of their subsidy for that particular year.

Hawaii has no subsidy program whatever. The placements in Hawaii and Nevada are limited, partly for lack of subsidy, partly for other reasons. They don't have the amounts of children within the foster care system that California has.

All of the three States in region 9 that have adoption subsidies allow these subsidies to go from one State to another. I would like to speak to this because I know that is an area in which you are interested. Should H.R. 3434 become law, it would be very important to see how this could be most expeditiously implemented. I would certainly hope that it could be implemented similar to the way the States are doing interstate placements now, where one State will fund a child from the foster care cycle and on into adoption even when that child moves to another State. The subsidy following the child rather than the situation with AFDC where if the birth family moves, the eligibility has to be reestablished.

Some problems could arise. For example, if a California family moved to Nevada they could conceivably be going into Nevada with a higher rate than the boarding parents next door to them would be getting from the State of Nevada. The subsidy payments are tied to the foster home rate to some extent.

The problem would be minimal in contrast to the problem that would occur if California had to close their case and Nevada open a new case. The program is small so there would not be numerous complications that exist with the AFDC programs.

I would also like to say a couple of words in regard to long-term foster care in contrast to permanency of adoption.

For those of us who have worked in adoption for many years and experimented with long-term foster care we have found that the kind of commitment that goes into adoption is very different than the commitment that goes into long-term foster care.

What we have seen repeatedly are children that are in long-term foster care with the agreement of agencies and the family at, say, age 7 and 8 when the child is seen as a nice little child and he's relatively happy. Often, later in his life he does some kind of mischievous activity that makes the family appear less favorable to the community—perhaps he's thrown out of school or whatever—and the next thing you know the family is asking the agency to return him; he's a foster child.

With the adoption that is a much more difficult process. The family has a legal tie and a legal commitment. It's not a matter of getting out of the commitment but it's a matter of where the motivation is for the family.

In adoption the family says legally the child will be part of their family for generations to come; not just this generation, but all the generations to come so he can return to the family with his adult children. He will not be an outsider. That's a very different kind of commitment that a family says they will help a child to get through school but then the child can go back to his original family. I am not advocating the closing of records or the cutting off of ties with birth families, simply stating that the commitment to adoption is a

very different one than the commitment to foster care, even with the subsidy.

The subsidy can afford families a financial resource so that they can go out and seek resources in the community for children that badly need care. The kind of children that we are placing now often come from abusive homes and they are victims of abuse. The children we are putting through the court system are probably some of the worst abused in the system; that is why they are finally removed from their parents. Adoption is the end result of what happened to the worst of the child abuse.

We're placing children at this point who are developmentally disabled who will never be self-sufficient and we are finding families for those children. Sometimes this willingness to take a child does not extend to their ability to be able to pay for the kinds of services that these children need.

I would like to give just one example of a child that recently has been placed to illustrate the kind of children we're talking about. This is a youngster who was placed who was born with spina bifida and is a quadraplegic. This child has probably 30-percent brain damage and was in Pacific State Hospital, which is hospital for developmental disabled children. This child was able to leave this hospital and move into an adopted family. The child will always be seriously handicapped.

That family is earning about $15,000 a year. For the kind of needs that this child has, there is no way that family is going to be able to provide them. However, if we of the community are providing for that child elsewhere, it's going to cost us considerably more than with the adoptive parents, not to speak of the fact that the child has a loving home, where he belongs, with adoptive parents.

We see this frequently with other children and I was particularly interested when some of the people were testifying earlier today as to the victims of our systems that grow up in foster care. I believe Dr. Kent spoke about the children that move from foster home to foster home and then are the people that later populate our mental hospitals and our prisons and I think that the ability to intervene with a subsidy system, to assist a permanent placement for these kids is one that we really need to address ourselves to.

I think that Congress has addressed themselves to the issue of permanency for children within the past few years more than in the history of congressional action before that and so on behalf or what has been done and what we hope that you will continue to do, I wish to thank you for this opportunity.

[The prepared statement follows:]

STATEMENT OF LOUISE FLEENOR

INTRODUCTION

The Adoption Resource Center in Region 9 was established through a grant from HEW to Los Angeles County Department of Adoptions to implement Title II of Public Law 95-266, the Child Abuse Prevention and Treatment Act of 1978. There are Adoption Resource Centers in each of the ten HEW Regions. The purpose of these Resource Centers is to eliminate barriers to adoption and to assure that permanent adoptive homes will be available for all children needing them.

In Region 9 there are approximately 30,000 children in foster care at any one time. Approximately three-fourths of these children are in California. In 1978 (1979 figures are not yet available in all states) over 5,000 children were placed in adoption in Region 9.

One of the primary barriers to adoptive placement in Region 9 is the limitation and in some states the total lack of subsidy available for children moving into adoptive placement. The four states in Region 9 have very different adoption subsidy programs. These four states are probably representative of the rest of the country and the variance that one finds in the adoption subsidy laws, administration, and benefits derived therefrom can furnish an overview of the availability of adoption subsidies and the resultant impact on adoption placements. Therefore, some information regarding the adoption subsidy programs in each of the four states follows.

ARIZONA

Of the four states, Arizona has by far the most liberal of the adoption subsidy programs. Arizona's interpretation of adoption subsidy is that it is the child who is subsidized and not the family with whom he is placed. Therefore, the subsidy is based totally on the needs of the child and does not relate to the adoptive family's income. The Arizona subsidy is available to the child outside of the State of Arizona, therey making placement across State boundaries a reality for children for whom adoptive families are not available within the State. The Arizona subsidy program can continue until the child's majority and payments in subsidies are broken down into categories according to the age and need of the child. Subsidy payments begin at $168 and go through various categories to $392 per month. An example of what such a subsidy program can do in assisting chilren to find permanent homes is evident when we note that from August 1976 through March 1978 the Arizona Department of Economic Security placed 203 children. Thirty-three or 16 percent of these placements were subsidized. At that time the Department of Economic Security moved into full utilization of the adoption subsidies and encouraged foster parents who were unable to keep children under their care without the monthly boarding payment to adopt those children through the subsidy program. From April 1978 through December 1979 the Arizona Department of Economic Security increased its placements to 460 children. One hundred eighty-seven, or 41 percent, were subsidized adoptions. This period represents an increase of 257 children being placed over the previous twenty month period. This is equal to a 127 percent increase in the number of children placed. The number of subsidized adoptions grew by 154 children which represents an increase of 467 percent over the first twenty month period of utilization of a liberal adoption subsidy program.

Arizona is currently spending over $500,000 per fiscal year on adpotion subsidies. This money must be appropriated each year by the Arizona Legislature. This creates certain problems in that the State Department of Economic Security can enter into contracts with foster parents or other adoptive parents for the duration of the child's minority. However, with the funds needing to be renewed by the State Legislature each year there constantly is a threat that the Legislature may not vote the funds necessary to fulfill the contract that the Department has made.

CALIFORNIA

California, the largest State in population, adoptive placements, and the number of children in foster care, has had a subsidy program in some of its counties since 1969 when a pilot project was begun. This became a statewide program in 1972. At its inception, the Aid for Adoption of Children or AAC (the California subsidy program) could only be utilized for a three year period. At this time the initial grant may not exceed three years. However, it can be extended for an additional two years when the adoption agency determines that there is a continuing need. The parent may petition for extension of financial assistance beyond the fifth year if there is a continuing need directly related to a chronic health condition which necessitated the initial financial assistance. Beyond the five years, the AAC program is limited to health needs of the child and other special needs that may be derived from the health problems.

California State law states that families accepted for the AAC program include those with limited incomes who need temporary financial assistance to facilitate the placement of a special needs child or need temporary financial assistance to purchase special services required for the placement of a special needs child.

Therefore, the child must be eligible to receive a grant based on his special needs and the prospective family's income must be reviewed in relationship to the child's special needs.

The Aid to Adoption of Children program in California was established in are administered through individual counties in some cases and through the are set by the counties and which may vary from county to county within the State. California adoption agencies are licensed by the State of California but are administered through individual counties in some cases and through the State Department in others.

In 1979 California spent roughly $2,698,000 on AAC. The average monthly payment was about $124 per month per child. Contrasted with this average payment is the payment for foster care for the fiscal year 1978–1979 which was about $305 per child. The AAC rate runs considerably lower though it can go as high as the foster care rate that is set by the county which is administering the particular AAC grant. In 1979, California placed 2,260 children for adoption through licensed agencies. Six hundred of these placements or roughly 28 percent received AAC subsidies. At any one time there are between 1,800 and 2,000 children receiving subsidies in California. This figure has remained fairly constant for the past several years. Californa does allow the subsidy payment to follow the child out of the State enabling interstate payments.

While the California program has assisted a great many children in moving into adoptive placement in the State of California, many children are not able to be adopted in California because of lack of subsidy continuing to their majority. Primary examples of these children are children who have lived with foster parents for long periods of time and for whom the foster parent cannot provide without an adoption subsidy. There are many times when there are sibling groups of two, three and four or more children who are living in one foster home. The withdrawal of the board rates for those children would greatly affect the sometimes marginal income of that family. To separate these sibling groups and move them out of the home in which they have been living sometimes for a number of years is not sound planning and not in the best interests of the children or foster family. The only solution is to wait until the children are in their teen years so that California's adoption subsidy will meet their needs until they become of majority age.

NEVADA

Nevada has a very limited subsidy program in regard to the amount of subsidy that can be paid. Except with approval of the State of Nevada Welfare Board, the maximum subsidy amount for board and care is $100 plus clothing allowance. In addition to this, the adopting parents can receive medical coverage for the child. For the fiscal year 1978–1979, Nevada subsidies were just under $10,000 excluding the medical payment. The State of Nevada placed 206 children in adoptive placement during 1979. The subsidy can be paid regardless of the state in which the child is placed.

HAWAII

Hawaii has no subsidy program. There are some funds that might be available under certain circumstances. Those funds have not been utilized.

MOVEMENT OF CHILDREN FROM STATE TO STATE

One of the major problems with the adoption subsidy programs at this time is that states vary in whether a child can move from one state to another and take the adoption subsidy with him. As indicated earlier, the three states of Region 9 that do have adoption subsidies allow those subsidies to go with the child to the state that will be the future home of the child. There are some problems in this in that the child may have a higher board rate and, therefore, a possibility of a higher subsidy rate coming from one state into another and causing discrepancies when board rates or subsidy rates are compared within the state but this seems a minor concern. It would be a very difficult administrative procedure to pick up the subsidy each time a family moved from state to state by the new state of residence in that it would necessitate an opening of some kind of case record and payment procedure by each state. Whereby if the child remained on the state roster where he originally was receiving foster care payments, there would be no transfer of responsibilities and the inherent duplication of administrative services. Since these funds would be federally reimbursed it does not seem that this would be an impossibility and would be

a simple approach to what could be a very complicated problem. Unlike the AFDC program which by its volume necessitates transfer of cases from state to state as recipients move and need to establish new eligibility, the subsidy program would be relatively small and could easily be set up through the state that originally was responsible for the child's foster care payment.

ADOPTION OR LONG TERM FOSTER CARE?

The question often arises as to why one would simply not consider long term foster care as an alternative rather than a subsidized adoption program. In all of the states, experience has shown that long term foster care simply does not provide the same kind of commitment on the part of the foster parents and the children in foster homes as does adoption. Adoption brings with it a legal permanency that binds a family together. For adoptive parents who wish to make a permanent commitment to a child, adoption offers a recourse that is not available in long term foster care.

EXAMPLES OF TYPES OF SITUATIONS WHICH REQUIRE ADOPTION SUBSIDY

Example No. 1: An adoption subsidy assists 30 year old Susie, a single adoptive parent and a school bus driver with a modest income, to provide for 8 year old Raymond.

Example No. 2: Ten month old Julie is a quadriplegic with strabismus, developmental delay and a diagnosis of cerebral palsy. Her foster home costs totaled $734 per month. Her adoptive family, including Julie, numbers six persons who are living on an income of $1,500 per month. The adoption subsidy of $225 per month helps Julie's family pay for her ongoing transportation costs to medical and treatment facilities, purchase of special equipment designed to help her cope with her handicap, and respite care, when necessary.

Example No. 3: Mark—18, Kevin—16, Kathy—14, Beulah—12, and Wanda—9, are a sibling group who have been living with their foster parents since Wanda's birth and the break-up of the children's original family. Their foster father earns a minimal income and the family cannot afford the maintenance for the five children though the love and devotion to the children has never been in question. A liberal adoption subsidy program covers the needs of the children until they reach majority years.

Example No. 4: Felix, age 3, was born with spina bifida, hydrocephalus and dislocated hips. He had suffered 30 percent brain damage, was placed in a state hospital and was finally placed for adoption. Felix is a paraplegic without bowel or bladder control. He may someday be able to walk if extensive medical treatment is available. His adoptive parents earn approximtely $16,000 per year. The adoptive mother has given up her employment to remain home with Felix and care for his many needs. The adoption subsidy of $321 per month allows his family to survive.

Example No. 5: Linda is a single adoptive parent who earns a sizable income ($25,000 per year) but her 8 year old daughter, Susie, carries deep emotional scars as a result of severe sexual and physical abuse. Susie's psychotherpy sessions are once a week. Her special day care, tutoring, medical, dental, and other needs are extensive and adoption subsidy helps to pay for these.

SUMMARY

The four states within Region 9 are able to offer varying degrees of financial assistance to adoptive parents. The Arizona Department of Economic Security experienced a substantial increase in the adoptive placements within the State when the adoption subsidies were available on a liberal basis. This would give support for the need for similar liberal programs in other states. The interpretation that Arizona gives to their subsidy program in that it is the child that is subsidized, not the family's needs that are being met, places the emphasis of subsidies squarely with the needs of the child and his best interests. The California experience has been positive but can be greatly expanded by increasing the length of time that the adoption subsidy is available. The adoption program in both Hawaii and Nevada is very small and the subsidies available less than desirable.

The Model State Adoption Act addresses adoption subsidies and encourages a subsidy program throughout the country. The need for a federally funded adoption subsidy program that can enable children to move freely across state lines

and will keep no child from loving parents who cannot afford his total costs is badly needed. The type of children that are being placed in adoption today have extensive kinds of special needs including massive physical problems, developmental delay, serious emotional problems and, very often, a combination of all of these. To expect adoptive parents to meet the large costs that surround intervention in the problems that the child brings to the home, places a burden upon the family that sometimes cannot be met and in other situations is to the detriment of the child in that while the family is trying to meet the financial obligation, the stress that is experienced by the family simply compounds the child's problems and the family's attempts to resolve them. In identifying barriers to adoption within Region 9, there is little doubt that one of the large barriers is the lack of a consistent, comprehensive subsidy program. The subsidy program proposed in H.R. 3434 can enable a large number of children to have permanent homes. The programs developed between states will offer a wider range of adoptive homes available and better cooperation.

Mr. CORMAN. Thank you. Mrs. Smail.

STATEMENT OF PEGGY SMAIL, DEPARTMENT OF ADOPTIONS FOSTER PARENT

Mrs. SMAIL. We have been foster parents since 1963. I was a foster child and was raised in the same foster home from birth until I was 21 years old.

We have three natural girls, five grand kids from the three girls, we have raised two long-term children, with the help of State aid funds; the youngest one now is 19, attending college and holding down a full-time job and out on her own.

We also have two adopted sons; one is 15. He is Puerto Rican Philipino. Our second one is a full-blooded Samoan. He is 13 and he towers over his father. He's a pretty big boy.

All the foster children that we have received, we have never mistreated one, we got back more love than we've put into it. We hope to continue 2 or 3 more years before retiring. Adopt anymore? No, we can't as we're too old to take on the responsibility. When we hear so many people tell how cruel foster parents are; that they can do a much better job, it is upsetting. If it wasn't for foster parents, what would they do, where would they go to have a home setting of both parents?

I get very angry. I get very upset and would like to go to war with them but we can't, and it would not help matters.

As far as the money we receive per month—everyone seems to think we are in it for the money.

I'd like for them to try it. For a 15- to 18-year-old child we receive $325 a month. Divide that by 30 days and it is $10.83 a day to feed that child, clothe the child, anything that the child needs, entertainment, transportation. So, we're not making money out of it, it is because we love children. And, if it wasn't for people like us, with the department of adoption and State funding, then we couldn't do it.

We want to thank you very much for hearing us.

We feel that there are a lot of adoption homes for these children, but most of the families could not without extra funds, be able to meet the medical bills that would be needed for this, or psychiatry therapy. We as foster parents wish with all our hearts that the extra funds could be found so that the children could be helped to find adoption homes.

Mr. CORMAN. Thank you very much.

Mrs. Whidden.

STATEMENT OF VIRGINIA WHIDDEN, DEPARTMENT OF ADOPTIONS FOSTER PARENT

Mrs. WHIDDEN. I want to thank you for listening to us and if I can possibly get across to you the dire need for extra funds for these children that are adopted that are handicapped in one way or another—if I can put that across and you can get it passed into a law, thank you very much.

We started out as foster parents in 1970. We had raised two girls to marriage and one son was in high school at the time we started off as foster parents, primarily starting it because it just seemed like such an empty house.

We have had 18 children; one of whom we adopted and I'll get to her in just a few minutes. We had one child who was brought to us with a broken leg; he had been fallen on when 6 weeks old by the boyfriend of the mother. The child was given back to the parent.

This foster parenting is not an easy job when you have to give children back to families that you know are going to redo exactly what has been done and there is nothing you can do about it; it hurts.

We had one little boy that was given to us at the age of 8 months by a drug-addicted mother. She was caught giving marihuana to her daughter and as soon as she found she had been caught doing it she came and grabbed her little boy and took off. And, there was no attempt made to get that child back because there just was not enough help to run after them.

We have had one little girl that was born to a mother that had been taking LSD, the child was born with this drug in her and had to go through withdrawal for 5 days. If you can imagine a 5-pound baby going through withdrawals—I would gather it was a pretty horrendous sight.

Then we came to little Susan who was our second child. Suzie came to us from UCLA. She had been born with tetrology of Fallot, which is an extremely serious heart problem. At the time that we got her she was 22 months old, weighed 11 pounds, had scars on her little rear that—well, just received from dirty diapers, from cigarette burns, you name it—that's where they came from.

This child had no vocal cords. She had cried so much she had no vocal cords. Her hair was like straw—you touch it, it would break. Needless to say she was a retarded youngster. We were told she would never speak, never be able to walk and that we should give her up. And, that to us was a challenge right there. We saw her through major surgery. She got to the point where she could talk, and she did learn to walk. I beg your pardon. I'll back up. She did learn to walk.

She got to the point where she found—we found out at this point that she had a hearing problem. She was 40 percent deficient in one ear and 60 percent in the other. Her eyes had a severe problem, too, where she would cock her head in order to localize whatever she wanted to see. We were told that she would never learn to read. This child is reading fifth grade work right now. She's 10½ years old.

She does have a severe speech problem, because of the hearing problem. She wears hearing aids but she does still have a hearing problem and a speech problem.

We saw her through major heart surgery. She was on the table for 8 hours; through the heart/lung machine twice, because they could not get the heart started after the initial surgery; had to reopen her and found that they had to apply a plastic patch to the heart in order to get it to work properly.

She was then in the CCV Department of the UCLA Hospital for 5 weeks; never knowing from 1 minute to the next. She had a cardiac arrest three times; fibrillation once and actually the doctors just didn't think she could make it at this, but this kid's a fighter, and she came back. She is now a 90-pound youngster; she's average height, her mentality is judged as normal/low. She is probably operating at the 2-year deficit that she came to us on.

I'm not trying to toot our horn at all. All I'm trying to say is that it's possible to bring these severely handicapped youngsters up to a normal life that they can live and have a happy life.

Before we adopted her, we were told, after her surgery, that she could now be put up for adoption, and we were asked if we would like to adopt her. After having a youngster for 5 years you don't drive them out so we said by all means we would like to adopt her and also, we felt, besides having a feeling for the youngster since she has a severe problem in temper tantrums and she frustrates—a very high frustration point. We felt that it would be difficult to find people who would be able to cope with these frustrations and Jekyll and Hyde attitudes, you might say.

So, we said OK, we will do it with the idea that our children—our natural children who were up in life—if anything happened to us, they would be able to take her with them.

We were also guaranteed at the time of placement—adoption placement, that we would be getting the Dymally bill for 5 years and would give us medical for the children, which we would need because my husband has since retired and we do not have the means—monetary—things at hand to take this child through what she must still go through. Our doctor told us quite frankly he recommended that we not adopt her because of the fact that who knows what's going to happen to her after puberty. She had spinal meningitis at 2 weeks so the brain damage is there—how much, we don't know yet because she is still progressing, and as long as she's still progressing they can't put any evaluation on how far she will go.

She needs speech therapy. She needs child guidance clinic or a psychologist to carry her through to try and help her to cope with her frustrations.

She needs dental work for her teeth are very bad. You name it, it's what she needs, so therefore this added money is needed, but in our case we can get along without that, but what we do need very desperately is medical to take her through her 21st year, at least, and medical going into medicare, if at all possible, after that, because she has had a surgery that has taken her as far as the medical sources can take her until she is 40 years old.

At the time she is 40 or around that age, her life will end, unless something more in surgery comes up and in the meantime, undoubtedly we will certainly need to get help. If this comes up there is no way we can possibly afford it without medical.

Also, in that same line we had one little girl who was a real doll and as far as we were concerned we would have loved to have adopted her too, but we had Susan and couldn't. So, she was put into another adoptive home where they took handicapped children. They'd had one hemophiliac and they took this other little girl who in the meantime has developed epilepsy and other problems and will need help also.

But, there are a lot of these youngsters who can be adopted and be given good homes, loving homes where they can fit in and live normal lives, but we all do need the help.

Thank you.

Mr. CORMAN. Ladies, thank you very much. Questions? Thank you. You've been very, very helpful.

Next witnesses are Al Colon from Marion Woods' office and Martha Burnside, San Mateo Children's Service.

We're pleased to welcome you to the committee.

STATEMENT OF AL COLON, CALIFORNIA STATE DEPARTMENT OF SOCIAL SERVICES

Mr. COLON. The name is Al Colon. I'm with the State department of social services. Before I begin with the written testimony that we have had prepared I'd like to first of all apologize for Mr. Woods. He cannot be here this morning. He's up in Fresno. So I had to come down from Sacramento to make sure we had someone here to testify.

In addition to that, I'd like to commend you and your staff in doing some excellent staff work with H.R. 3434 for which we're very happy with.

The State department of social services would like to commend your efforts in providing the leadership needed to bring about the reform in an antiquated foster care system.

H.R. 3434 is the most important piece of legislation to be introduced in Congress during the past decade because it clearly sets a policy to protect children and to support the family structure as the best place for a child.

Our experience in California has been both frustrating and exhilarating. Frustrating because we have not been able to move quickly enough to bring about reform in our foster care system and exhilarating because of one, the demonstration projects under S.B. 30 which place an emphasis on family reunification; and second, the new proposed State regulations which implement the family reunification program on a statewide basis. Almost all of the contents of S. 30 are included within our redesign of social services.

Just to give you some historical background on S. 30: In 1974 State Senator Arlen Gregorio introduced legislation which provided for statewide reform of foster care systems. The bill provided a $25 million appropriation for services to families. Governor Ronald Reagan vetoed the bill. Senator Gregorio then introduced similar legislation which set into place a 4-year demonstration project involving no more than four counties at an annual cost of $2 million. Governor Brown, Jr., signed a bill known as the Family Protection Act of 1976.

The Family Protection Act was designed to address some of the serious problems within the foster care system. These include the lack of sufficient early intervention to assist natural parents in coping with

problems in caring for their children; the absence of objective standards for removing the child from its home; and the inadequate exploration of our availability of appropriate alternatives to out-of-home placement which have led to children too easily entering foster care.

Adequate legal counsel for parents and children in courts and administrative hearings has often not been available to protect their rights. The lack of structured and timely decisionmaking has resulted in the absence of, or inadequate case filing for children and their parents, leading to failure to reunite children with their natural parents or to provide children with more stable and permanent placements.

The lack of preventive services for the families in need of assistance and the lack of planning for children has left the foster care system which allows children to remain in foster care for an indeterminate amount of time.

Some of the assumptions behind S. 30 include that it is better to keep children at home whenever possible and, when not possible, to provide a permanent placement quickly. That is, in the absence of substantial danger to a child's physical health, where a child's suffering severe emotional damage, or unless parents, guardians, are unwilling to have physical custody of the child it is in the best interest of the child to remain with or be returned to the parents or guardian.

If reunification of the child with the parents cannot be achieved, adoption, guardianship, planned long term placement in that order provide the best alternatives for permanent stable environment for this child.

Later on you will hear from Martha in regard to the specifics of S. 30 and what has occurred in the experience in San Mateo County.

Two of the counties that were selected for implementation were Shasta and San Mateo Counties.

What I find rewarding in S. 30, H.R. 3434, and in the social services redesign now being discussed in California is a change in attitude and public policy for children. The foster care system as we know it today has all the financial incentives, money appropriated, geared for placement. The efforts going on today are an indication that first, preventing separation and second, reunifing families is where the incentives and staff must be if we're to change our present foster care system.

Keeping with the need to properly define the social services delivery system and making it more accountable for its actions, the department has proposed new regulations for family and children's programs designed to provide adequate parenting structure to insure the growth and development of children-at-risk into independent adults. The programs are, one, emergency response; two, family maintenance; three, family reunification and four, long-term placement.

I'd like to discuss briefly each of these areas.

EMERGENCY RESPONSE PROGRAM

This service is available to any child at any time who is alleged to be endangered by abuse, neglect, or exploitation. The service is designed to provide immediate protective services to prevent damage to a child. While every attempt is made to maintain the child with the

parents, emergency shelter services are available and needed. The specific service outcome will be that the child, at least temporarily, is protected from harm and a recommendation with regard to the necessity of additional service.

The services provided under this program are social work services, emergency care service and transportation services.

FAMILY MAINTENANCE PROGRAM

This 6-month program is available to all children and their families where the child's growth and development are determined to be endangered as a result of abuse, neglect, or exploitation by his or her parents. This program in addition to protecting the child's right to growth and development is designed to prevent separation of parent and child by treating and/or instructing the parent in how to correct or compensate for the problems which cause the child to be in danger.

The specific program outcome is a determination that the child can safely remain with his or her parents without further social service intervention. The services provided under this program are, again, social services, emergency care services, transportation services, respite care services and parent training and education services.

FAMILY REUNIFICATION PROGRAM

This program is based upon the permanency planning principal. This program is available for 18 months to any child and his or her natural parents when the child is placed in foster care to protect him or her from abuse, neglect, or exploitation. Through a variety of services an attempt is made to correct or compensate for the causal factors of out-of-home placement and if necessary, be able to document that the child is likely never to be able to safely return home.

The specific program outcome is the reunification of a child with his parents or a determination that an alternate parenting structure must be arranged for the child. The services provided under this program, again, are social services, emergency care, transportation, parent training, and education. Respite care services are available as needed to children and their families only after the child has returned home from placement.

LONG-TERM PLACEMENT

This plan is available to all children in out-of-home placement for whom a determination has been made that they will not be returning to their parents and they are not immediate candidates for adoption. The program consists of arrangements by the worker for a long-term placement in an alternate parenting structure to guide in development of the child, the supervision and periodic reassessment of this long-term placement, and a specialized need for the child which are not assigned to the alternate parents. The services provided under this program are, again, social services, emergency care services, and transportation.

Our experience in implementing the changes needed in the foster care system have been numerous. One of the largest problems facing California is the fiscal constraints placed by the ceiling on title XX and title 4–B. The amount of inflation during the past 5 years has cut

the purchasing power for social services by at least 40 percent. The Governor's budget for the first time during fiscal year 1979–80 budgeted $5 million toward 24-hour emergency response programs for children from State general funds.

This program is to protect children both at home and in foster care. I'd like to move on to discuss a bit of the needs in the area of training.

The State, in addition to placing a heavy emphasis upon the family for protection of children within that structure is planning to implement through title 20 training, a massive training effort for foster care parents. Although California has some of the most dedicated and loving foster parents in the Nation we must provide proper training and handling of children with behavioral, emotional, and physical problems.

It is the department's intent to develop and establish a statewide training delivery system providing easy access to every foster parent. The major part of foster parent training will be provided by the community call system using training curriculum developed by the University of California, Los Angeles, in conjunction with the State foster parents association, county welfare department, the community college system.

It is anticipated that at least 4,800 potential and actual foster parents will be trained. The department has not yet entered into any contract for foster care training during this fiscal year and the training program is contingent upon the passage of H.R. 3434.

I think that H.R. 3434 which you have worked on diligently for the past 1½ years is urgently needed throughout this country to protect the family and more importantly, children. It has been demonstrated in both San Mateo and Shasta Counties that when family reunification services are planned for and delivered approximately 88 percent of all children placed voluntarily are returned home permanently within 6 months.

The requirement specified under the new foster care program under title 4–E are crucial to the success of getting children into permanent and stable homes. The other area which H.R. 3434 addresses and is crucially needed by children in foster care is the adoption assistance program.

A large percentage of the children categorized as not adoptable are those with emotional and/or physical handicaps. This program will provide the additional assistance needed by many families to open their homes to adopt a foster child.

I'm looking forward to implementing the changes reflected in H.R. 3434. Hopefully Congress will also appropriate the necessary funds to implement the requirements as specified in H.R. 3434.

Thank you.

Mr. Corman. Thank you very much, Mr. Colon.

Miss Burnside, we're pleased to welcome you.

STATEMENT OF MARTHA BURNSIDE, SUPERVISOR, SAN MATEO COUNTY CHILDREN'S SERVICES FAMILY PROTECTION ACT, DEMONSTRATION COUNTY

Miss Burnside. Thank you.

In order to describe how the Family Protection Act is functioning in San Mateo County, I'm going to try to discuss briefly first how it

was implemented and then how we saw it work at the social work level and then what some of the results have been.

In March 1977 the Social Services Division for the San Mateo County Department of Public Health and Welfare applied to be a demonstration county under the Family Protection Act. In April the division director was notified that San Mateo had been selected as the over 500,000 population demonstration county and in May, the board of supervisors approved the division's participation in the project. The recommendation for approval of the project was based on the department's conviction that the additional services which could be funded through the act would reduce the tax burden on the county by decreasing the cost of out-of-home placements and would at the same time provide more stable placements to children. It became effective October 17, 1977, after the signing of a contract between the county and the State and to implement the demonstration project a new position of project director was developed relating to the administration of children's services in the social services division.

The priority need perceived by children's services, and one for which the department had attempted unsuccessfully to obtain funding for several years was homemaker/housekeeper service, and this was the first service to be developed with the Family Protection Act funding.

Since there were no community resources with the capability of meeting the particular needs of abusing and neglecting families the providers of these services were selected from members of the agency shelter care staff, who had had experience working with the children from such families in the shelter care program. They were given additional training on working with parents and children in their own home. This unit originally composed of a supervisor, four family care workers, a housekeeper, and a community worker, has proven to be the most effective component of the project in diverting children from out-of-home placement. The workers are on call around the clock and provide services after assessment by a social worker on both an emergency and a planned basis.

Other social services required by the act are provided by contract. In the first year contracts were awarded to the family service agency for family counseling; parent support groups; therapeutic day care for abused infants; to Guadalupe Health Center, a community mental health program for family counseling; to Children's Home Society, a private, nonprofit children's agency for the development of emergency respite and extended—that is, night and weekend—day care; and to Parental Stress Service, a volunteer agency for the development of a volunteer parent aid program. Contracts were monitored by the project director and reviewed quarterly by an agency committee. On the basis of performance all except the parent aid contract were increased and renewed for an 18-month period in January 1979.

Legal services to children are provided by contract with the San Mateo County Private Defenders Office which has identified a panel of attorneys in private practice who are qualified to represent children in juvenile proceedings.

Legal services to staff are provided by contract with the district attorney's office. The two deputy district attorneys assigned to the project devote the majority of their time to it and have developed considerable expertise. Two social workers from children's services have

full-time assignments as court officer and work closely with the attorneys and staff on the preparation of cases for court.

A series of orientation meetings was held with the juvenile court judge, referee, and attorneys, at the onset of the project. These meetings have continued on approximately a quarterly basis to discuss interpretation of the law and to recommend changes in it.

Although not required by the act, services which have been developed concurrently which have facilitated its implementation include a multidisciplinary team, placement review committee, and a foster adoption program. The multidisciplinary team includes a pediatrician, a child psychologist, one of the deputy district attorneys assigned to the Family Protection Act, a representative of the contract agencies, a social service line supervisor and the project director. Social workers must bring to the team for review all cases of severe child abuse and may bring any on which they have questions about diagnosis and treatment. Other professionals and paraprofessionals who know the child or family such as teachers, foster parents, and so forth, are invited as appropriate.

This approach to case planning assures consideration of all possible alternatives for the child, and provides much needed support to the caseworker in making decisions which may affect the child's entire future.

The placement review committee composed of a child psychiatrist, children's services administrator, and the line supervisors are responsible for foster home licensing, shelter care, and institutional placement, performs a similar function for children for whom group or institutional placement is being considered. The committee's combined knowledge of children's needs and placement resources helps to insure that the facility selected will best meet the needs of the child in question, at the least cost to the county.

The fost-adopt program has been developed to try to meet in a better way the needs of children for whom the permanent plan is expected to be adoption. Before these children have been relinquished or freed by the court from parental custody they may be placed with foster parents who will be willing to adopt the child if the child is freed. The intent is to prevent multiple moves and provide stability of care for children who probably will not be reunited with their own families.

With that overview of how the act is implemented, I'd like to move to talking a little bit about how it has actually worked at the line-worker level.

The project unit, which is the unit in which I work, is the only unit in children's services which is assigned only Family Protection Act cases. The unit consists of nine social workers; two of whom work half time. Four have masters degrees; the other five are experienced social workers who have demonstrated skills in working with families and children. Our use of contract services had a slow beginning, both because it took a while to get services established and because the social workers were not sure how beneficial the services would be. We also recognize some reluctance on the part of the workers to give up the role of primary counselor or therapist and move to the role of case manager.

The procedures for initiating, utilizing, and monitoring Family Protection Act services generated what seemed to us an astronomical number of forms with which we had to become familiar and we also

had to plan time for consulting with various service providers. However, once we moved beyond the startup problems, contract service have been well utilized and have proven effective.

From the beginning, we found the in-home services of the family care workers and the housekeeper invaluable, and speaking as somebody who has worked in the child welfare field for many, many years to be able to have these services has been a little bit like having a little bit of Christmas every day. These in-home workers provided the necessary supportive services and the monitoring of marginal situations, and were frequently able to help families develop some sense of trust in the social service system. The other services we found essential in maintaining children in their own homes were day care, respite care, transportation when needed and some form of parental counseling.

The Family Protection Act provided for 6 months of voluntary services in the home with court action necessary to continue services beyond that time limit. We learned that a 6-month period is not enough time. Many isolated parents whose children are at risk are not enchanted by social service intervention in their lives and are very slow to develop enough trust to begin to use services and to derive benefits from them.

The necessity for court action at the end of 6 months meant that some families withdrew just as they were beginning to be able to use the services. Legislation has been drafted to extend this 6-month period to a 12 month period for the remainder of the time the project will be in effect.

At the present time approximately 85 percent of the cases in the unit are under the court supervision. Some are cases in which the children are in their own homes but the great majority are those in which children have been removed from their own homes and placed with relatives or in foster care. We realized that court reviews every 6 months rather than every year would obviously double the amount of court work, but we did not anticipate the tremendous amount of social worker time that would be required by court appearances as cases moved through the time deadlines and we found ourselves dealing with contested and/or continued hearings. For example, to date there have been 13 court reviews of one case which was opened in October 1977. We have also learned that the fact that a child remains in foster care for an 18- or 24-month period does not necessarily mean parental rights will be terminated and the child freed for adoption. The juvenile court may order a case referred for termination of parental rights, but the final judicial decision will be affected by the interpretation of section 232 of the Welfare and Institutions Code in California and by the parents' determination to contest. The issue of parental rights and children's rights is still very much an issue at the point of considering permanent planning. Some children have been freed for adoption; some have moved into guardianship and some have continued under the jurisdiction of the juvenile court in long-term foster care.

The final area I want to talk about give some of the actual results that we have seen, based on a 2-year experience with the project.

From the lineworkers' point of view there is no question about the effectiveness of in-home services in keeping children out of the foster care system, nor about the effectiveness of time limits and periodic

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reviews in returning children home earlier or moving toward permanent planning for them. Based on our experience trying to manage the workload involved, we see it as essential that there be a very careful assessment of the tasks necessary to determine and reach program goals, so that those tasks which are either clerical or required for monitoring purposes will be handled by clerical staff and an EDP system instead of being added to the innumerable tasks already expected of social workers.

In terms of the overall effectiveness of the Family Protection Act in resolving the problems it addresses, the following specific information is pertinent:

After 2 years of operation in San Mateo County, the foster care population decreased by 26 percent and the institutionally placed population decreased by 48 percent. At the same time guardianships increased by 36 percent and adoptions by 66 percent. Equally important are the estimates of cost savings. During the first 2 years of the project, the county cost of foster care was reduced equal to and beyond the local match required to obtain Family Protection Act State money. The costs saved from foster care—where the average length of stay is estimated at 4½ years—exceeded the amount of money required to fund the services to divert children from placement during the first 2 years of the program.

In October 1977, when the project began, there were 630 children in foster care in San Mateo County. On January 1, 1980, there were 419. In the 2-year period of time from October 1977 through September 1979, 482 children were removed from their homes; 272 were returned home. In the same 2-year period Family Protection Act services were given to a total of 1,123 children which means that 641 children received services in their homes and were not placed. I believe some of our experience does relate to the material in H.R. 3434.

[The prepared statement follows:]

STATEMENT OF MARTHA BURNSIDE

HOW THE FAMILY PROTECTION ACT WAS IMPLEMENTED IN SAN MATEO COUNTY

In March, 1977, the Social Service Division of the San Mateo County Department of Public Health and Welfare applied to be a demonstration county under the Family Protection Act. In April, the Division Director was notified that San Mateo had been selected as the over 500,000 population demonstration county, and in May, the Board of Supervisors approved the Division's participation in the Project. The recommendation for approval of the Project was based on the Department's conviction that the additional services which could be funded through the Act would reduce the tax burden on the County by decreasing the cost of out-of home placement and would, at the same time, provide more stable placements for children. It became effective October 17, 1977, after the signing of a contract between the County and the State.

To implement the demonstration project, a new position of Project Director was developed relating to the Administrator of Children's Services in the Social Service Division. The 20% budget limitation restricted the number of Project funded line social worker staff to 4. These positions were filled by skilled and experienced social workers in the Children's Services Section selected from a number who volunteered.

The priority need perceived by Children's Services, and one for which the Department had attempted unsuccessfully to obtain funding for several years, was homemaker/housekeeper services and this was the first service to be developed with FPA funding.

Since there were no community resources with the capability of meeting the particular needs of abusing and neglecting families, the providers of these services were selected from the Agency's shelter care staff—again volunteers—who

had had experience working with these kinds of children in the shelter care program. They were given additional training on working with parents and children in their own homes. This unit, originally composed of a supervisor, four family care workers, a housekeeper and a community worker, has proven to be the most effective component of the Project in diverting children from out-of home placement. The workers are on call around the clock and provide services, after assessment by a social worker, on both emergency and planned bases. In order to provide more flexibility in staffing, the community worker position was recently reclassified to family care worker.

Other social services required by the Act are provided by contract. In the first year, contracts were awarded to Family Service Agency for family counseling, parent support groups and therapeutic day care for abused infants; to Guadalupe Health Center, a community mental health program, for family counseling; to Children's Home Society, a private, nonprofit children's agency for the development of emergency respite and extended (i.e. night and weekend) day care; and to Parental Stress Service, a volunteer agency, for development of a volunteer parent aide program. Contracts were monitored by the Project Director and reviewed quarterly by an agency committee. On the basis of performance, all except the parent aide contract were increased and renewed for an 18 month period in January, 1979.

Legal services to children are provided by contract with the San Mateo County Private Defender's Office which has identified a panel of attorneys in private practice who are qualified to represent children in Juvenile Court proceedings. Legal services to staff are provided by contract with the District Attorney's Office. The two Deputy District Attorneys assigned to the Project devote the majority of their time to it and have developed considerable expertise. Two social workers from Children's Services have full-time assignments as court officers and work closely with the attorneys and staff on the preparation of cases for Court.

A series of orientation meetings was held with the Juvenile Court Judge, Referee and attorneys at the onset of the Project. These meetings have continued on approximately a quarterly basis for discussion of interpretation of the law and recommend changes in it.

Although not required by the Act, services which have been developed concurrently which have facilitated its implementation include a Multi-Disciplinary Team, Placement Review Committee and a Fost-Adopt Program. The Multi-Disciplinary Team includes a pediatrician, child psychologist, one of the deputy district attorneys assigned to Family Protection Act, a representative of the contract agencies, a social service line supervisor and the Project Director. The social workers must bring to the Team for review all cases of severe abuse and may bring any on which they may have questions about diagnosis or treatment. Other professionals and paraprofessionals who know the child or family such as teachers, foster parents, etc. are invited as appropriate.

This approach to case planning assures consideration of all possible alternatives for the child and provides much needed support to the case worker in making decisions which may affect the child's entire future.

The Placement Review Committee, composed of a child psychiatrist, Children's Services Administrator and the line supervisors responsible for foster home licensing, shelter care and institutional placement, performs a similar function for children for whom group or institutional placement is being considered. The Committee's combined knowledge of children's needs and placement resources helps to ensure that the facility selected will best meet the needs of the child in question at the least cost to the County.

The Fost-Adopt Program has been developed to try to meet in a better way the needs of children for whom the permanent plan is expected to be adoption. Before these children have been relinquished or freed by the Court from parental custody, they may be placed with foster parents who will be willing to adopt if the child is freed. The intent is to prevent multiple moves and provide stability of care for children who probably will not be reunited with their own families.

HOW THE FAMILY PROTECTION ACT OPERATES AT THE LINE-WORKER LEVEL

The Project Unit is the only unit in Children's Services which is assigned only FPA cases. The unit consist of 9 social workers, two of whom work half time. Four have MSW's; the other 5 are experienced social workers who have demonstrated skills in working with families and children. Our use of contract services had a slow beginning, both because it took a while to get services established

and because the social workers were not sure how beneficial services would be. We also recognized some reluctance on the part of our workers to give up the role of primary counselor or therapist and move to the role of case manager. The procedures for initiating, utilizing, and monitoring FPA services generated what seemed to us an astronomical number of forms with which we had to become familiar, and we also had to plan time for consulting with the various service providers. However, once we moved beyond the start-up problems, contract services have been well utilized and have proven effective.

From the beginning, we found the in-home services of the family care workers and housekeeper invaluable. These in-home workers provided necessary supportive services and monitoring of marginal situations, and were frequently able to help families develop some sense of trust in the social service system. The other services we found essential in maintaining children in their own homes were day care, respite care and transportation when needed, and some form of parental counseling.

The FPA provided for 6 months of voluntary services, with court action necessary to continue services beyond that limit. We learned this is not enough time. Many isolated parents whose children are at risk are not enchanted by social service intervention in their lives and are very slow to develop enough trust to begin to use services and to derive benefit from them. The necessity for court action at the end of 6 months meant some families withdrew just as they were beginning to be able to use services.

Legislation has been drafted to extend this 6 months to a 12 month period for the remainder of the time the project will be in effect.

At present approximately 85 percent of the cases in the unit are under court supervision. Some are cases in which the children are in their own homes, but the great majority are those in which children have been removed from their own homes and placed either with relatives or in foster care. We realized that court reviews every six months rather than every year would obviously double the amount of court work, but did not anticipate the tremendous amount of social worker time that would be required by court appearances as cases moved through the time dead lines and we found ourselves dealing with contested and/or continued hearings. For example, to date there have been 13 court reviews of one case which was opened in October, 1977. We have also learned that the fact that a child remains in foster care for an 18 or 24 month period does not necessarily mean parental rights will be terminated and the child freed for adoption. The Juvenile Court may order a case referred for termination of parental rights, but the final judicial decision will be affected by the interpretation of Section 232 of the W & I Code and by the parents' determination to contest. The issue of parental rights and children's rights is still very much an issue at the point of considering permanent planning. Some children have been freed for adoption; some have moved into guardianship and some have continued under the jurisdiction of the Juvenile Court in long term foster care.

WHAT ARE THE RESULTS?

From the line workers point of view there is no question about the effectiveness of in-home services in keeping children out of the foster care system, nor about the effectiveness of time limits and periodic reviews in returning children home earlier or moving toward permanent planning for them. Based on our experience trying to manage the work-load involved, we see it as essential that there be a very careful assessment of the tasks necessary to determine and reach program goals, so that those tasks which are either clerical or required for monitoring purposes will be handled by clerical staff and an EDP system instead of being added to the innumerable tasks already expected of social workers.

In terms of the overall effectiveness of the FPA in resolving the problems it addresses, the following specific information is pertinent:

After two years of operation in San Mateo County, the foster care population decreased by 26 percent and the institutionally placed population decreased by 48 percent. At the same time, guardianships increased by 36 percent and adoptions increased by 66 percent. Equally important are the estimates of cost savings. During the first two years of the Project, the County cost of foster care was reduced equal to and beyond the local match required to obtain FPA State money. The costs saved from foster care (where the average length of stay is estimated at 4.5 years) exceeded the amount of money required to fund the services to divert children from placement during the first two years of the program.

In October 1977, when the Project began, there were 630 children in foster care in San Mateo County; on January 1, 1980, there were 419. 482 children were removed from their homes in the two year period from October 1977 through September 1979; 272 were returned home. In the same two year period FPA services were given to a total of 1,123 children which means that 641 children received services in their homes and were not placed.

Mr. CORMAN. Thank you very much for your testimony. We will have some questions, Mr. Rousselot.

Mr. ROUSSELOT. Thank you, Mr. Chairman. We appreciate your testimony here today and your willingness to help us out in analyzing various aspects of the foster care issue. Of course we're interested, as you know in H.R. 3434, and what the impact would be once we get the new program in place.

Mr. Colon, how soon will the State be able to implement the foster care protection and procedures contained in the new title 4–E program and the title 4–B amendments that will be the law upon the enactment of H.R. 3434? Now you're aware that title 4–B contains the amendments that require the State to track the child and keep separate case files for each child. Are you familiar with that?

Mr. COLON. Yes; I am.

Mr. ROUSSELOT. OK. How soon do you think you'd have that implemented?

Mr. COLON. Well, we started a process about 14 months ago to essentially redesign the social services delivery system here in the State of California. That process—we were hoping to implement that by July 1 or to implement during a phase-in period over the next fiscal year where all the requirements as specified under H.R. 3434 by the end of the following fiscal year will all be in place.

Mr. ROUSSELOT. By the end of the fiscal year. The Federal fiscal year or——

Mr. COLON. No. The State—our own local——

Mr. ROUSSELOT. OK. Your own——

Mr. COLON. June 30.

Mr. ROUSSELOT June 30. OK.

Mr. COLON. Of 1981.

Mr. ROUSSELOT. We have to keep track of all our different fiscal years.

Mr. COLON. Because of the massive changes and the lack of resources in many of the counties for the alternative services needed for the families, those will have to be developed over a period of time.

The other thing that is going to have to occur is a massive training for social workers who are actually new in this service because it's an attitude change that has to occur essentially from being a therapist or being a counselor to being a case manager.

Mr. ROUSSELOT. And that requires some extra training?

Mr. COLON. Yes; it does. As we're taking a look at the implementation of H.R. 3434 we're also taking a look at training needs and developing a plan here for the State of California.

Mr. ROUSSELOT. Thank you Mr. Chairman.

Mr. JENSEN. Has there been a difference as far as the decision by the judges as far as involuntary placements or their role as far as taking the child from a home because of emergency caretakers and emergency homemakers going into the home. What is in the interaction between the judges making those decisions and those kinds of services?

Miss BURNSIDE. The Family Protection Act provides that the only basis on which a child may be removed from the home is if there is substantial physical danger or severe emotional damage, so if we can use in-home services for a child in a family the court is very willing to go along with that, provided that we demonstrate that we can effectively prevent harm to the child.

In the event that in-home services are not effective, if we demonstrate to the court why they were not effective there has been no problem with that child being removed, provided one of those two bases for removal is present.

Mr. CORMAN. Thank you both very much.

Our final panel is Dr. Jerry Seliger, Sgt. Carol Walker Painter, and Dr. David Friedman.

Mr. CORMAN. We are pleased to welcome you to the committee and appreciate your patience. You may proceed.

STATEMENT OF SGT. CAROL WALKER PAINTER, LOS ANGELES COUNTY SHERIFF DEPARTMENT, YOUTH SERVICES BUREAU

Sergeant PAINTER. Congressman Corman, Congressman Rousselot, it is a pleasure to be here today to speak to you and to present training needs from the viewpoint of law enforcement.

For the last 6 years I have served as the operations sergeant for the child abuse detail of the Los Angeles County Sheriff's Department.

This detail is comprised of men and woman whose sole responsibility is the investigation of child abuse cases, both physical and sexual abuse occurring throughout Los Angeles County.

This detail was created as a result of the concern of Sheriff Pitchess for the protection and service delivery to the children of this county. The unit receives no outside funding and is in existence only because of the high priority the sheriff's department gives this type of case.

The cases we handle range from very minor cases of overdiscipline to cases wherein the child was so severely damaged that he or she died.

One of the frustrating aspects of this work is attempting to cope with the ever-decreasing financial resources. During this time of severe inflation and economic pressure, the very things that cause increased family unrest and instability, it is most depressing to hear that community resource money will be cut.

We deal very closely with the groups in our community that offer services to families in need and the prospect of continuing without their support services is a real threat to our systems network.

It was pleasing to me, Congressman Corman, to have you aware that this type of problem happens not only in the poor community. I can assure you over my 6 years of experience in this field people that find themselves in trouble are police officers, social workers, lawyers, doctors, elected officials. This is a people problem and this problem can touch any of us at any time.

Because of that we are desperately in need of a wide scope of resources that can deal with different people that have different needs coming from different walks of life. They have to have something that is applicable to them.

We know that there will not be a great windfall of money or a new superagency to take the burden, so we have to look to each other and certainly to you, our voice in Washington, to take the personal re-

sources available and mold them into an even more effective system of child protection and service delivery.

The key to the system is training. There has been concern on the part of some that law enforcement has no place in the handling of cases of this type; that it is a family problem. I offer to you that the child is entitled to the same constitutional rights for protection that you and I enjoy as adults and I firmly believe that the protection of the children of our Nation is everybody's business.

Most of the time when a child abuse case is brought to the system's attention, all disciplines involved are seeking the same goal—protection of the child and a safe and secure family setting.

Through interdisciplinary training we can learn the other profession's vocabulary and understand how we can work together and complement each other in achieving this goal.

We must insure, if necessary by legislative mandate, that all professionals that have the responsibility for the welfare of children have extensive training in the identification of suspected cases.

There are no words to express the feelings one has when standing alone in the coroner's office viewing the broken, battered body of a child and wondering why there wasn't someone, somewhere, at some time that could have intervened with this family, that could have recognized the symptoms of the potential danger and become involved before it was too late.

Children cannot choose what is best for them. We, the adults decide that for them. Professional titles alone cannot insure that the best decisions are made. We must look to the training these professionals receive to insure credible decisions.

If proper training is not given we are speaking into the wind when we say the "system" is prepared to handle families that are most certainly in crisis.

When I first began my work in the juvenile field, I anticipated that budget concerns were a thing of the past. After all, don't kids get all they need when it comes to funding and available resources? I learned very rapidly it was quite different.

We have all seen millions and millions of dollars spent on teenagers acting out so severely that society demands that we, the government institution and you as legislators do something about the problem.

We run around and put Bandaids on wounds and scars that began long ago and then watch the child turn 18 and become an ineffectual adult and an ineffectual parent and thus repeat the cycle.

Those of us who work in this field know that money has to be spent much, much earlier. Many times the child is still in the cradle, if we are to provide a strong opportunity for the child to become an effective adult.

Congressman Rousselot expressed an interest in parenting classes and what the results of that are. I would like to suggest that the curriculum of our schools be very closely scrutinized. It would not be that costly to have life experience classes included in this curriculum and have those classes starting in kindergarten level. A person may never become a parent but it is increasingly difficult to deal with our changing society as an adult and be a productive, stable member of that society. We cannot just give lip service to prevention. We must begin by aggressively seeking ways to give our children the tools for a better tomorrow.

I want to thank both of you for calling these hearings. We speak for the children. They do not represent an economic bloc. They do not write letters and they do not vote. It would be very easy to overlook them. You would not be here today if you did not care and that concern is appreciated.

Thank you.

Mr. CORMAN. Thank you, Sergeant.

Who is next? Dr. Friedman?

Dr. FRIEDMAN. Thank you.

STATEMENT OF DAVID FRIEDMAN, M.D., PROFESSOR OF PEDIATRICS, UNIVERSITY OF SOUTHERN CALIFORNIA SCHOOL OF MEDICINE, AND CHAIRMAN, TASK FORCE ON CHILD ABUSE AND NEGLECT OF THE AMERICAN ACADEMY OF PEDIATRICS

Dr. FRIEDMAN. Congressman Corman and Congressman Rousselot, thank you very much for holding these hearings.

I think by and large this testimony is going to be a very good followup on what Carol Painter has said. She and I have appeared on many platforms together all around the country and in a variety of training programs.

I was sitting, listening earlier—

Mr. CORMAN. Speak up, please.

Dr. FRIEDMAN. As I was sitting here listening to the earlier remarks I thought of a paper in "Clinical Pediatrics" which the committee might want to read. The paper by Mike Rothenberg, a child psychiatrist from Seattle is entitled "Is There an Unconscious Conspiracy Against Children in the United States?" It's a very provocative paper and I think it ties in very well with the kinds of issues that the panelists talked about today.

Several years ago my wife and some of my colleagues and myself wrote a book chapter. It was part of a book called "Working for Children: Ethical Issues Beyond Professional Guidelines." The theme of the book involved the fact that most of us as professionals have guidelines set down for us in every discipline, whether it be medicine or social work or education or law enforcement but most of the time, and particularly in child abuse, we're working outside the guidelines. We have to make up our own guidelines as we go along. Our chapter is entitled "The Dilemmas of Child Abuse" and we listed eight different dilemmas facing professionals in the child protection field.

It is one of these dilemmas, the one specifically related to training which I will talk about today; however all of the dilemmas are really related to training and we allude to this in the discussion of each of the dilemmas: Gray areas in the identification process, the relationships between professional and patient or client, the professional tradition to "do no harm," the fine line between punishment and abuse—in many situations it's very difficult to know if it's punishment or abuse, the rights of parents versus the rights of children, the question of neglect and, last, the trauma of working in the field of child abuse which I'll allude to later in these remarks.

The Academy of Pediatrics recognizes, and has recognized for a number of years, the gap in professional training and we've been developing training materials aimed at closing the gap.

With the help of a grant from the National Center on Child Abuse in Washington and with the help of prestigious consultants around the country the academy has developed, field-tested and is now marketing a training program—a child abuse curriculum. I brought along with me one unit of this curriculum. This is the latest manual of the training program that has been developed. The rest of the units—some of them are position papers, some of them video tapes, some of them are movies—they're all designed to help a leader develop a child abuse training program.

I'd like to put in a word here for the national center in Washington. They have done an excellent job of supporting training programs and other child abuse activities around the country and in providing strong leadership in the field of child abuse and neglect.

Now this curriculum that I have here with me is primarily intended for health professionals. Professionals from other disciplines are included in the presentation of materials at workshops, seminars, continuing education courses and a variety of local and regional and national programs. Also other professional groups have developed similar training programs for their disciplines—law enforcement, social service and education. There has been much interdisciplinary activity in the development of these curriculi and there is overlap in the use of some of the training materials and resorce personnel. Medicine uses some of the material in the social services unit and vice versa.

One of the problems that I alluded to earlier was the trauma of working in the field of child abuse. It's a very real problem. If you're talking about training you have to meet this issue.

Some people testifying yesterday talked about "burn out" among professionals. If you work in this field, it's very traumatic. It stirs up all kinds of feelings—anger, guilt, hostility, pity—in people working in the field and these feelings are difficult to handle. The solution to this problem, it seems to me, lies primarily in training, more training and then continually retraining. The training must deal with knowledge, skills and attitudes—basic knowledge and knowledge of new developments in the field because the field is rapidly expanding.

Interpersonal skills are not well taught in medical schools and other professional schools. You'd think they would be but even in pediatrics the training in this area is minimal. Professionals working in this field really need to have interpersonal skills that will allow them to work with problem families and allow them to work in very difficult family situations.

There is also a need for interdisciplinary skills—that is the ability to work with people from other fields and disciplines—and coping skills. Coping skills involve attitudes which allow the professional not only to deal with the feelings and actions of his/her patients or clients but also with his her own feelings.

Another thing professionals must learn is the appropriate development and use of support systems, both for themselves and for the families that they're working with. Now that sounds obvious but I was in the private practice of pediatrics for many years and I know that I really worked very much as a solo person. I did not make as much use of the community support systems which were available as I should have and I think all of us have this to learn—you can't work alone.

I believe that that only with this kind of training of the professionals and others working with children, and I am including in this, parents, adoptive parents, foster parents, and all child caregivers, will children be given the optimal care and opportunities for growth which they need if they are to become mature, creative adults.

The success of the legislation being proposed by Congressmen Corman and Rousselot is really dependent on the appropriate training of all professionals and caregivers working with children and their families.

Thank you very much for allowing me to present this testimony.

Mr. CORMAN. Thank you, sir.

Dr. Seliger.

STATEMENT OF JERRY SELIGER, PH. D., PROJECT DIRECTOR, TITLE XX TRAINING PROJECT, CALIFORNIA STATE UNIVERSITY, NORTHRIDGE

Mr. SELIGER. I'd like to thank the—both Congressman Corman and Congressman Rousselot or the staff for inviting me this morning and also I'm appreciative of my fellow panel members remarks because it sort of set the stage for the remarks that I want to make.

My name is Jerry Seliger and I'm the director of title 20 training project at Cal State University in Northridge and additionally to that I'm on the faculty of the department of health science and I work in the area of community health services so I have a kind of—several different levels of reference to this problem.

I've prepared some remarks this morning which I'd like to give to the committee and then I want to talk about it. I won't read these remarks to you but these are sort of background materials——

Mr. CORMAN. Your written statement will appear in the record, and also your oral statement.

Mr. SELIGER. All right. You want to see the written statement now or——

Mr. CORMAN. Please.

Mr. SELIGER. OK. The—we've been—Cal State University of Northridge has been working with the department of public social services in Los Angeles County since—for several years and in 1978 we collaborated with them to develop a grant application for title 20 training funds and since 1978—since April of 1978, in fact it's been 2 years—2 years this week we have been working with them and during that period of time we've developed and conducted more than 70 different training programs in diverse areas and the papers I've given you describe some of the areas of the topics that relate to children's services and to child abuse and so on.

More than 12,000 persons have participated in the training. I want to give you the scale of this because of—it's a tremendous effort.

One of the provisions in the regulations for title 20 training are that training has to begin at title 20 providers and the 12,000 participants I described by in large were employees of the Los Angeles County Department of Public Social Services or the Los Angeles County Department of Adoptions. They did not include members of the sheriff's department. They did not include physicians. In some instances they included some foster parents but those people were there more as a—

not part of the formal audience. They did not include attorneys. They did not include non-DPSS—non-department of adoption employees.

My colleagues on the panel a few minutes ago suggested—I think Miss Painter, particularly, suggested that there's a tremendous need and a decrease of resources and training.

Title 20 training has the resource that would be of assistance to other providers; and because of the regulation we've been stymied in providing services to those people so we referenced that in the paper I have given you.

We'd ask your—your careful consideration for waiving some of the regulations that preclude training for non-California providers.

Now, our training project as I said has been an extraordinary one for us, the scale has been extraordinary but then so have been several things.

I know the university is one of five California State universities in the Los Angeles area. We don't have a school of social workers. We are a large university. We have a sister campuses throughout the Los Angeles basin and we work with those campuses to develop curriculum and to find instructors for the training that I mentioned and we also work with USC and UCLA's schools of social work and social welfare to find instructors and develop curriculum and so on.

And, we work with other agencies including the American Humane Society to do the same thing. In short, what California State University in Northridge is doing is working with the title 20 provider agencies, DPSS and county department of adoptions to develop curriculum and programs and to provide services that are specific for their needs.

We are very pleased to do that because it means we could marshal a lot of resources and it means that we can make the training as cogent and to meet the needs of the agencies involved.

Now our biggest concern at this point and time is that there are a number of training needs which haven't been met. Dr. Friedman suggested there's a need to deal with knowledge in the field and skills and attitudes, interpersonal training, and interdisciplinary education and case management.

On the—I believe it's on the second page of the document that I've given you we recommend 16 topical areas that have emerged in the last 2 years and that are specifically related for what we feel for skills and knowledge training for child abuse. Again, I want to reiterate that these areas here are—we are limited in the audience that can participate in the training.

Now—I just want to make a couple of other remarks about the way we see training. We put together—working with the county title 20 providers—we put together formal classes, workshops, symposiums, conferences, seminars. In other words, there's a variety of different methods. However, we really see our work as adult education because we are working with adults. Working with people that have considerable experience; some of them are shocked—shellshocked as Dr. Friedman was pointing out—so that what we do is we couple didactic that has the traditional kind of teach/tell with as much opportunity for people who are practitioners to do problem solving.

In other words, the tennor of the whole thing is interdisciplinary. That's our aim and that's our intent. We haven't been able to do as

much of that as we'd like because of the regulations that limits interdisciplinary participation.

Those are kind of my general remarks and I want to thank you very much for your time and attention and I'll be glad to answer questions on that paper, if you have them.

[The prepared statement follows:]

STATEMENT OF JEROME SELIGER, PH. D.

1. BACKGROUND

California State University, Northridge (CSUN) has collaborated with the Los Angeles County Department of Public Social Services (DPSS) since April 1978 to develop and provide specialized in-service training to Title XX providers. In Los Angeles county DPSS and the Los Angeles County Department of Adoptions are the sole Title XX provider agencies. To date nearly 12,000 persons have participated in one or more of approximately 70 training programs designed to meet the expressed needs of these providers.

As a public university, CSUN has been able to provide the required 25 percent matching contribution for Title XX grant funds. We do so in a unique manner: the match includes the provision of training programs in addition to those paid for with the federal contribution. The result is a significant increase in the availability of training resources.

Training programs developed and offered thus far that relate to children's services or to child abuse topics include:

(1) Protective service (in collaboration with American Humane Society).
(2) Licensing: foster parents.
(3) Supervising the childrens service role.
(4) Communication: assertiveness skills.
(5) Child growth and development.
(6) Family violence.
(7) Stress management.
(8) Management of protective facilities for nondelinquent children.
(9) Human sexuality.
(10) Interviewing for protective services.
(11) Public child welfare (in collaboration with Calif. State Dept. of Health and providers from eight other counties).
(12) Case work intervention with the disabled child.
(13) Art therapy.
(14) Incest.
(15) Violence: gangs, rape, community.
(16) Foster parent seminars: child abuse, stress, culture differences.

In addition to the various specialized in-service training programs we are collaborating with DPSS to develop a film that focuses on child abuse. Entitled, "When Love Goes Wrong," the film will be used for training childrens services personnel and for public education.

Because of recent cutbacks in Title XX training funds in California (our funding was reduced by 47 percent in the last half of 1979 and was virtually terminated in January, 1980) work on the film and the provision of further training has come to a halt. The approval of H.R. 3434 is expected to remedy this situation.

2. PROBLEMS

Originally our Title XX training project had an interagency/interdisciplinary focus. We intended to use Title XX training resources to improve interagency coordination, understanding, treatment, and services. Indeed the genesis for the project was the Los Angeles County Juvenile Justice Action Coordinating Committee (JJACC), a special interagency group established by the Los Angeles County Board of Supervisors to seek better collaboration by county departments responsible for youth services.

The JJACC interdisciplinary focus mirrors the intent of the Title XX legislation. Unfortunately our intent to use Title XX training to bring about improved services and integration of services was stymied by the regulations (Title 45, Chapt. 11, Part 228.81). They preclude use of Title XX training resources with non Title XX populations. The result was that early in our project and subsequently we have been unable to maximize use of the Title XX resource.

3. RECOMMENDATIONS

Feedback about the training conducted during the first two years of the training project has generally been positive. Specific requests for training that have not been met thus far and which relate to child abuse topics include:

(1) Incest: dealing with children who are victims of abusing parents.
(2) Handling the hostile parent.
(3) Interviewing skills.
(4) The denial syndrome.
(5) Sexual abuse and exploitation.
(6) Effects of family violence on children.
(7) Victimology.
(8) Emotional abuse and deprivation.
(9) Effects of physical reject and inadequate supervision.
(10) Parental abandonment.
(11) The psychology of escapism.
(12) Cultural differences in defining and diagnosing child abuse.
(13) Diagnosis of worker stress.
(14) Recognition of child abuse.
(15) Appropriate discipline.
(16) Alternative therapy modalities.

Once Title XX training funds are restored we will be able to begin curriculum development for these topics and to offer training. Because of federal regulations participation in that training is limited to Title XX providers. Most of the thousands of persons locally who work with abused children or their parents will not be able to participate. Therefore we recommend that the regulations regarding non Title XX provider participation in training be changed.

Our recommendation mirrors Recommendation No. 4, 1979 Report of the Los Angeles County Commission for Public Social Services:

> DPSS should seek HEW waivers which would permit the use of Title XX funds for multidisciplinary training for professionals in child abuse prevention and treatment. Specifically County Counsel, District Attorney, Health Services, and officers of the court together with DPSS social work staff. The training should emphasize goal setting and problem solving via the case conference approach.

Mr. CORMAN. Thank you, Doctor. Mr. Rousselot?

Mr. ROUSSELOT. We are grateful to the three of you for being here and helping us understand better what's happening in training at the local level.

Let me ask the three of you if you want to comment. As you know under H.R. 3434 relating to training in connection with title XX services, we set a 4-percent allotment through the State. My understanding is that that will be about $10.8 million under the current formulas. Will you comment on that and your use of it and so forth?

Mr. SELIGER. Well, yes. I can sort of speak to it from our prospective. Actually, the person who could speak more to it was the person on the previous panel, Mr. Colon.

Mr. ROUSSELOT. Right.

Mr. SELIGER. But what it means is that California now will have sufficient training dollars assuming that 4-percent cap stays——

Mr. ROUSSELOT. Uh-huh.

Mr. SELIGER [continuing]. To do most of the work that he described and would allow us to continue the work that we've already begun here. Now of course there are certain priorities in the State and we cannot—there are always unlimited needs in fine-eyed resources so that that—those dollars from my understanding would be sufficient but I can't speak to it.

Mr. ROUSSELOT. Well, as you know the State is now required to have a State plan for its training——

Mr. SELIGER. Yes.

Mr. ROUSSELOT [continuing]. To connect it up with title XX. Is that too prohibiting from your standpoint?

Mr. SELIGER. Well, I think it makes sense. It's a rational way to approach things, obviously.

Mr. ROUSSELOT. You mean we did something rational? Anyone else want to comment? Are you familiar enough with it?

Sergeant PAINTER. Yes; I would.

I think it's great and I think the plan is the way to go but I would hope that there would be monitoring to make sure that it is done in an expedient manner and that the materials that are offered and the training plan goes to those people that are on the line; that it's not wasted.

Mr. ROUSSELOT. That are already in place?

Sergeant PAINTER. Yes. People that are really dealing with the children, the real service providers.

You know my heart just went out to the foster mother who spoke and I'm sorry they're gone now. I can't tell you what it means to go at 2 o'clock in the morning with a little child in your arms and have somebody receive that child with love. But to walk away feeling this poor person has no idea of what they're getting, no skills to handle it and really no support. Sometimes we do have negative things happen in foster homes but it's the same type of thing that would happen if a law enforcement officer did something wrong—everybody else then carries that burden for them and I think your training would give them some of that moral support that has been lacking.

There has been legislation previously. For example, there was the Antonovich bill 2 years ago to have law enforcement training and that's been up in post now and we still don't know where that is. Every year that goes by that we have more people going out on the line without that training, somebody's wasted.

Mr. SELIGER. If I could just say——

Mr. ROUSSELOT. Yes.

Mr. SELIGER. To simply follow up on this. We'd love to have them involved with us. We'd like to get the sheriff and probation and the courts involved with DPSS and with adoptions. We would love to do that. We would like to work with them in developing a curriculum that goes across the board because the DPSS children's services worker who works with the sheriff deputy—they both have the same child at the same time; unfortunately up to now we haven't been able to work as much together as we might be able to do.

Mr. CORMAN. Thank you.

Mr. SELIGER. We'd like to do that.

Mr. CORMAN. Doctor Friedman, do you have any comment?

Dr. FRIEDMAN. No. I think I covered pretty much what I wanted to. Thank you.

Mr. CORMAN. Thank you.

Let me tell you one of my concerns about training money and why I supposedly put some limitations on it.

Higher education is primarily the responsibility of the States. We have so little money in this whole field of providing social services and I was apprehensive that if we don't limit it, we'll find the States are replacing funds that should be put into higher education with Federal funds.

I think there is an obligation on the part of States to educate social workers, psychologists, law enforcement officers as well as to educate engineers and doctors and lawyers. I have mixed feelings about this. I realize that the money is needed. You can see how very difficult it is for us to get the money to that child and I don't have an easy answer, but that's my dilemma. I share it with you.

Mr. SELIGER. Congressman, I share your sentiments. They're really fine and I appreciate them. Let me just sort of look at it from two different perspectives.

We're outsiders in the university and as such we have a different perspective of the needs and we can bring resources.

I know the training resources in the county of Los Angeles are really limited. They don't have——

Mr. CORMAN. It's probably the best county in the country.

Mr. SELIGER. It's one of the best. That's right and it's really limited so the title XX training resource allows them to go outside and find resource persons that they couldn't normally get. The other part of it is always the problem of in-service education and that is who's responsibility is it? Is it the responsibility of the employee to ready himself or herself for employment or the responsibility of the employer to ready the employee for employment? That's kind of a dilemma that—I don't know how to grapple it.

Dr. FRIEDMAN. I'd like to comment that if you are worried about the amount of money you are proposing for training, having this amount of money in the bill does encourage professionals to include this kind of training in their own programs. Child protection skills have a low priority in most social work schools, medical schools and other professional schools. But putting this into the bill it's going to encourage professional schools to include the teaching of appropriate knowledge, skills and attitudes in their programs.

Mr. CORMAN. You mean even the regents are more responsive if there are a few Federal dollars in the pocket.

Dr. FRIEDMAN. Definitely. But it isn't only the money, it sets priorities.

Sergeant PAINTER. Well, as I mentioned in my prepared statement, it's a topic that people who know me hear time and time again. You've been around this world for a long time and in this county for a long time and I want to mention that John Rousselot and Houston Florenoy were the two people that I really kind of grew up with and have always been on my ballot in this area——

Mr. ROUSSELOT. Well, he's moved down to a higher column.

Sergeant PAINTER. He's still in the area. But anyhow, we forever see children's services cut. The people that work in this area and in the county are almost an incestuous group. They all know each other, drink together; whatever it takes to keep going.

There isn't very many of us. We are continually trying to justify our existence. We can talk about yesterday, the situation of how much time is spent in trying to keep your grant going, your funding going. You know if you have a good viable community resource—have them in your area where they've almost gone under because they have to take one staff person and all they do is play the funding game.

Mr. ROUSSELOT. The paperwork game.

best copy available

Sergeant PAINTER. Paperwork game. You know—whatever that little "tweeky" think to get the hook and get the money and it keeps going on and on and on. We have to look around at those people and we have to do the training. It would be like you gave us a new car for our county and you didn't teach us how to use it, you wouldn't be effective.

And I think the plea that comes from the three of us is just give us the opportunity to take the resources we have and give them that training and we will deliver a fine product.

Mr. CORMAN. Well, thank you all very much. Without objection the documents given to us this morning by Judge Giannini will be made a part of the record.

Mr. ROUSSELOT. I have another document. For Kids Sake is an organization in Brea, Calif., and they have delivered documents to us explaining a lot of their activities so that will be a part of the file.

Mr. CORMAN. And, we'll leave our record open for a week, if any of the witnesses would care to make additional statements.

Mr. ROUSSELOT. Just promise to keep the paperwork down.

Mr. CORMAN. That's right.

The Los Angeles County Welfare staff, Pat Johnson, Ray Garcia, Betty Mines, and others have been tremendously helpful to our staff. We have learned more in 2 days than we will learn in Washington, I suspect, in 2 months or maybe 2 years.

Mr. ROUSSELOT. They ought to stand up and take a bow.

Thank you.

Mr. CORMAN. But to all the witnesses, you have been extremely helpful to us. We share your frustration in the lack of resources and yet I suspect that this affluent nation is becoming more aware of the problem. Perhaps H.R. 3434 is a modest start.

I hope that the State of California doesn't decide that it can get out of the taxing business and receive all of its money from Washington. We haven't that much.

Mr. ROUSSELOT. We're a little short here too.

Mr. CORMAN. Anyway, when we're cutting budgets we will remember the stories that you have told us and I trust that we will be responsible in future funding. We'll do our best. John?

Mr. ROUSSELOT. Thank you, Mr. Chairman.

The hearing is adjourned. Thank you.

[Whereupon, at 12:45 p.m., the hearing was adjourned.]

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